

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

RECEIVED
 Date Stamp (Received)
 MAY 25 2021
 Bayfield Co. Zoning Dept.



Permit #:	21-0163
Date:	6-8-21
Amount Paid:	\$210 5-27-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
 Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name:		Mailing Address:		City/State/Zip:		Telephone:		
Gary & Vicki Henrickson		2225 S Pioneer		Davenport, IA 52804		(563) 343-0662		
Address of Property:		City/State/Zip:		Cell Phone:				
16685 Aspen Ct		Cable, WI 54821		373-0673				
Contractor:		Contractor Phone:		Plumber:		Plumber Phone:		
Ken Dumont		(715) 671-3102		None				
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached		
Mike Fortak		(715) 817-2034		6173 Iron Lake Rd Iron River, WI 54847		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID#		Recorded Document: (Showing Ownership)		
SW 1/4, NE 1/4		Gov't Lot		10425		590 162		
Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #
22		2173		12, 373-74		9, 10, 11		Block #
Township 43 N, Range 7 W		Town of Cable		Subdivision		Wilde River		
Section 22		Township 43 N, Range 7 W		Town of Cable		Lot Size		Acreage
						2.35		

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline: _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline: _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$70,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type:	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story ^{1 1/2}	<input checked="" type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>CONV</u>	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input type="checkbox"/> Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Year Round	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 42	Width: 28	Height: 22

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Accessory Building (explain) <u>garage / storage - No sleeping</u>	(42 X 28)	1,176
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Gary & Vicki Henrickson Date: 5/22/21
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Mike Fortak Date: 5-22-21
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

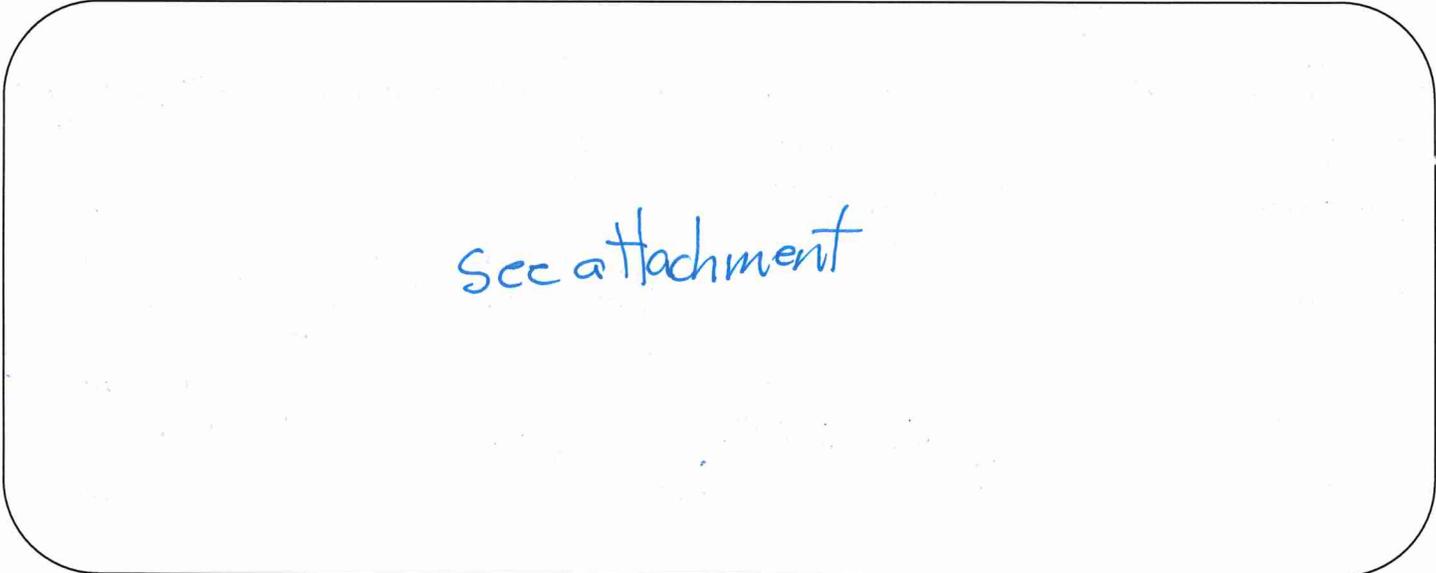
Address to send permit: Ken Dumont #17070 Frels Rd Cable WI
 Attach Copy of Tax Statement ✓
 If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted 54821

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N)** on Plot Plan
- (3) Show Location of (*): **(*) Driveway and (*) Frontage Road** (Name Frontage Road)
- (4) Show: **All Existing Structures** on your Property
- (5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
- (6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
- (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	110 Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	55 Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	220 Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	88 Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line ROW	55 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	120 Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	110 Feet	Setback to Well	28 Feet
Setback to Drain Field	130 Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-0163		Permit Date: 6-8-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: OWNERS @ SITE 2nd Floor - "BONUS ROOM" + STALLED		Zoning District (RRB)		
Date of Inspection: 6/3/21		Lakes Classification ()		
Inspected by: [Signature]		Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)				
Not for human habitation or sleeping If pressurized H2O enters structure get septic permits				
Signature of Inspector: [Signature]				Date of Approval: 6/4/21
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

Bayfield County, WI



6/1/2021, 7:48:46 AM

- Building Footprint Outline 2009-2015
 - Changed
 - Demolished
 - Existing
 - New
 - Unknown
 - Ashland Co Parcels
- Douglas Co Parcels
- Rivers
- Lakes
- Tie Lines
- Meander Lines
- Approximate Parcel Boundary

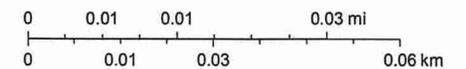
- Section Lines
- Government Lot
- Municipal Boundary
- Red Cliff Reservation Boundary
- All Roads
 - Federal
 - State

- County
- Town
- CFR
- Private
- Survey Maps
 - UnRecorded Map
 - Recorded Map

- Corner Tie Sheets
 - Section Corner Monument on File
 - Section Corner Monument Referenced on Survey
 - Driveways
 - Buildings
 - bayfield_gis.SDE.T_Cable
 - Index

- Intermediate
- bayfield_gis.SDE.T_Bayview
- Index
- Intermediate
- bayfield_gis.SDE.T_Bayfield
- Index
- Intermediate

1:783



Bayfield County Land Records

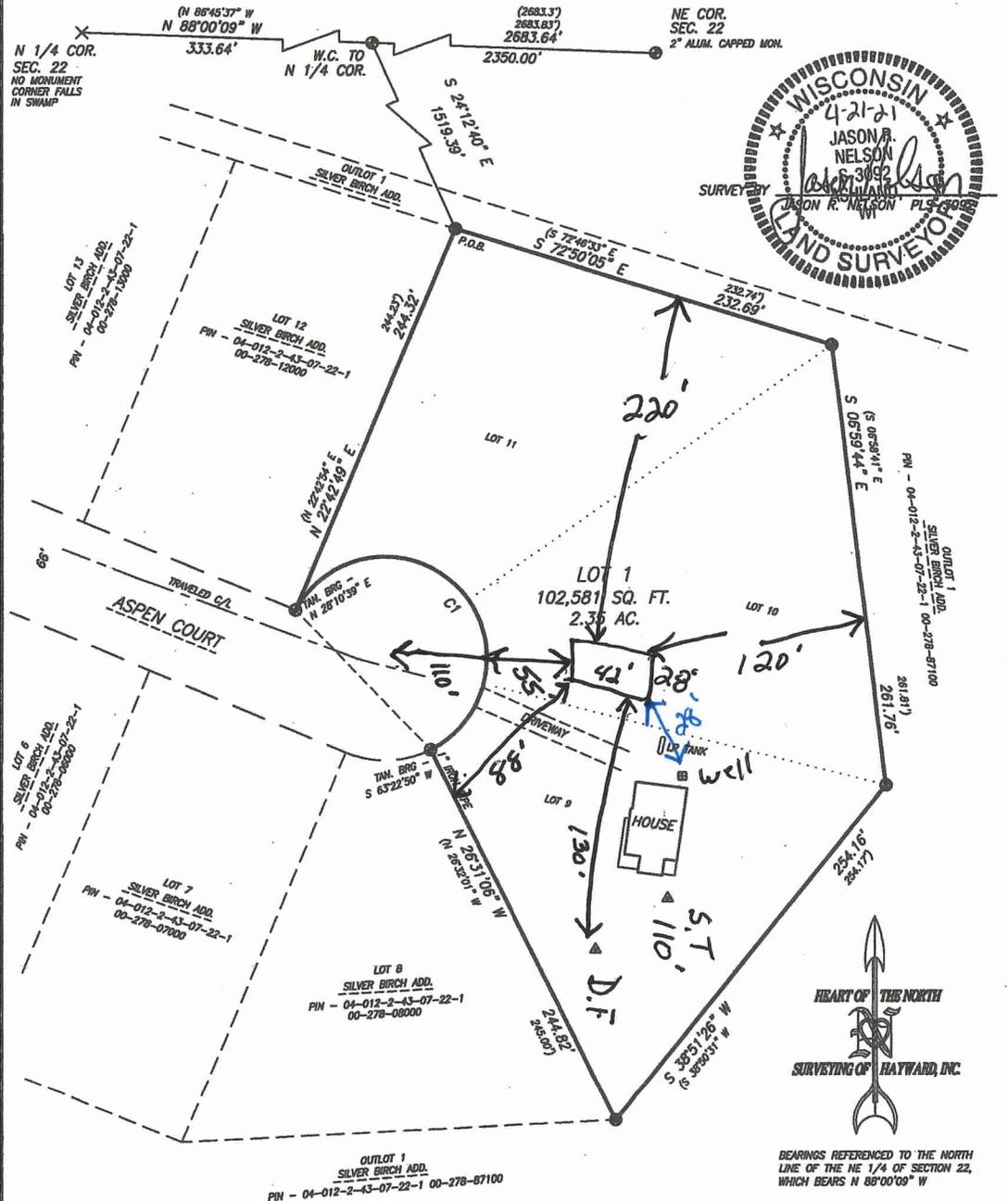
2021R-588350

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
04/28/2021 09:35AM
TF EXEMPT #:
RECORDING FEE: 30.00
PAGES: 2

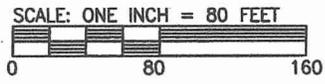
Vol. 1205MB 373374

BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 2173

LOTS 9, 10 AND 11 OF SILVER BIRCH ADDITION TO WILDE RIVER, RECORDED IN VOL. 5 ON PAGES 18 - 20, DOC. 281536, LOCATED IN THE SW 1/4 - NE 1/4 OF SECTION 22, T. 43 N., R. 7 W., IN THE TOWN OF CABLE, BAYFIELD COUNTY, WISCONSIN



CURVE	ARC	RADIUS	DELTA	CHORD BEARING	CHORD LENGTH
C1	225.36'	60.00'	215°12'10"	N 44°13'15" W	114.38'



LEGEND

- FOUND 2" IRON PIPE, UNLESS NOTED
- FOUND 3/4" IRON ROD
- () RECORDED DATA
- ▲ SEPTIC VENT
- WELL

CLIENT: GARY HENRICKSON

JOB NO: H20/251 FILE: M/143NR7M/SEC22
 SCALE: 1" = 80' ACAD: H20 HENRICKSON
 NB. B-30 PG. 130 COORD: H20_251
 FIELD WORK SHEET 1 OF 2 SHEETS
 COMPLETED: 1/13/21

HEART OF THE NORTH SURVEYING OF HAYWARD, INC.

10330N DUFFY ROAD
 HAYWARD, WI 54843
 WWW.HONSURVEYING.COM

PH: 715/634-2442
 FAX: 715/634-8444

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BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 2173

LOTS 9, 10 AND 11 OF SILVER BIRCH ADDITION TO WILDE RIVER, RECORDED IN VOL. 5 ON PAGES 18 - 20, DOC. 281536, LOCATED IN THE SW 1/4 - NE 1/4 OF SECTION 22, T. 43 N., R. 7 W., IN THE TOWN OF CABLE, BAYFIELD COUNTY, WISCONSIN

SURVEYOR'S CERTIFICATE

I, JASON R. NELSON, PROFESSIONAL LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFY:

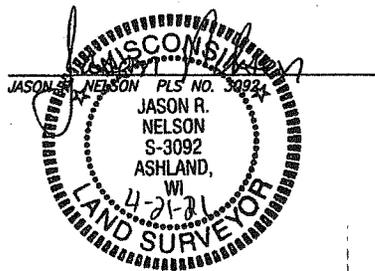
THAT ON THE ORDER OF GARY HENRICKSON, I HAVE SURVEYED AND MAPPED LOTS 9, 10 AND 11 OF SILVER BIRCH ADDITION TO WILDE RIVER, RECORDED IN VOL. 5 ON PAGES 18 - 20, DOC. 281536, LOCATED IN THE SW 1/4 - NE 1/4 OF SECTION 22, T. 43 N., R. 7 W., IN THE TOWN OF CABLE, BAYFIELD COUNTY, WISCONSIN;

SAID PARCEL CONTAINS 102,581 SQUARE FEET, WHICH IS 2.35 ACRES;

THAT THIS MAP IS A TRUE REPRESENTATION OF SAID SURVEY;

THAT I HAVE FULLY COMPLIED WITH SECTION 236.34 OF THE WISCONSIN STATUTES AND THE BAYFIELD COUNTY SUBDIVISION CONTROL ORDINANCE IN MAKING SAID SURVEY, SUBDIVISION AND MAP; AND

THAT SAID SURVEY AND MAP ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.



BAYFIELD COUNTY PLANNING AND ZONING APPROVAL

THIS BAYFIELD COUNTY CERTIFIED SURVEY MAP IS HEREBY APPROVED BY THE BAYFIELD COUNTY PLANNING AND ZONING DEPARTMENT.

DATED THIS 28th DAY OF April, 2021

ROBERT SCHIERMAN
PLANNING AND ZONING DIRECTOR

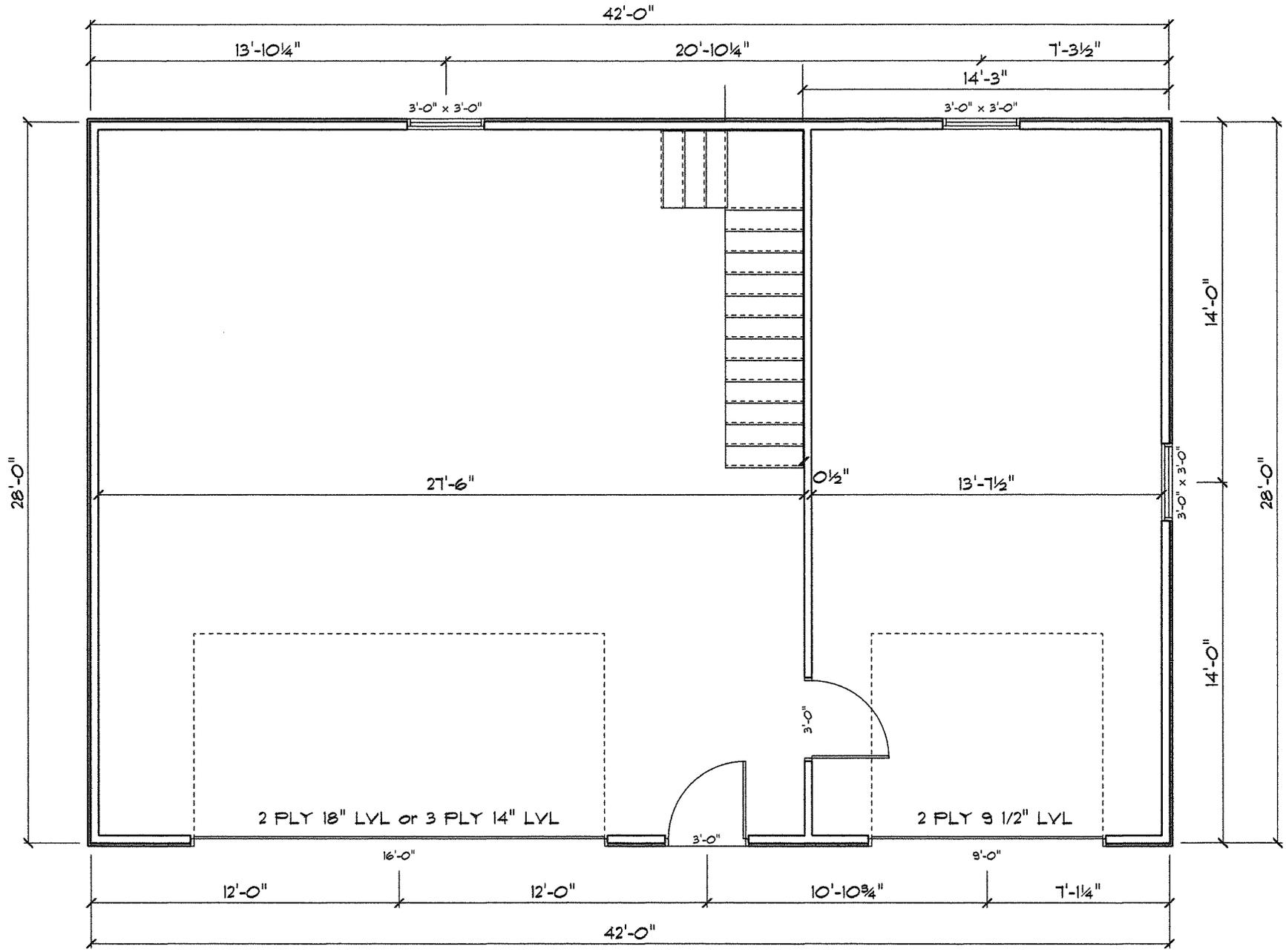
CERTIFICATE

CLIENT: GARY HENRICKSON
JOB NO: H20/251
NB. B-30 PG. 130
FILE: M/T43NR7W/SEC22
ACAD: H20 HENRICKSON
COORD: H20_251
SHEET 2 OF 2 SHEETS

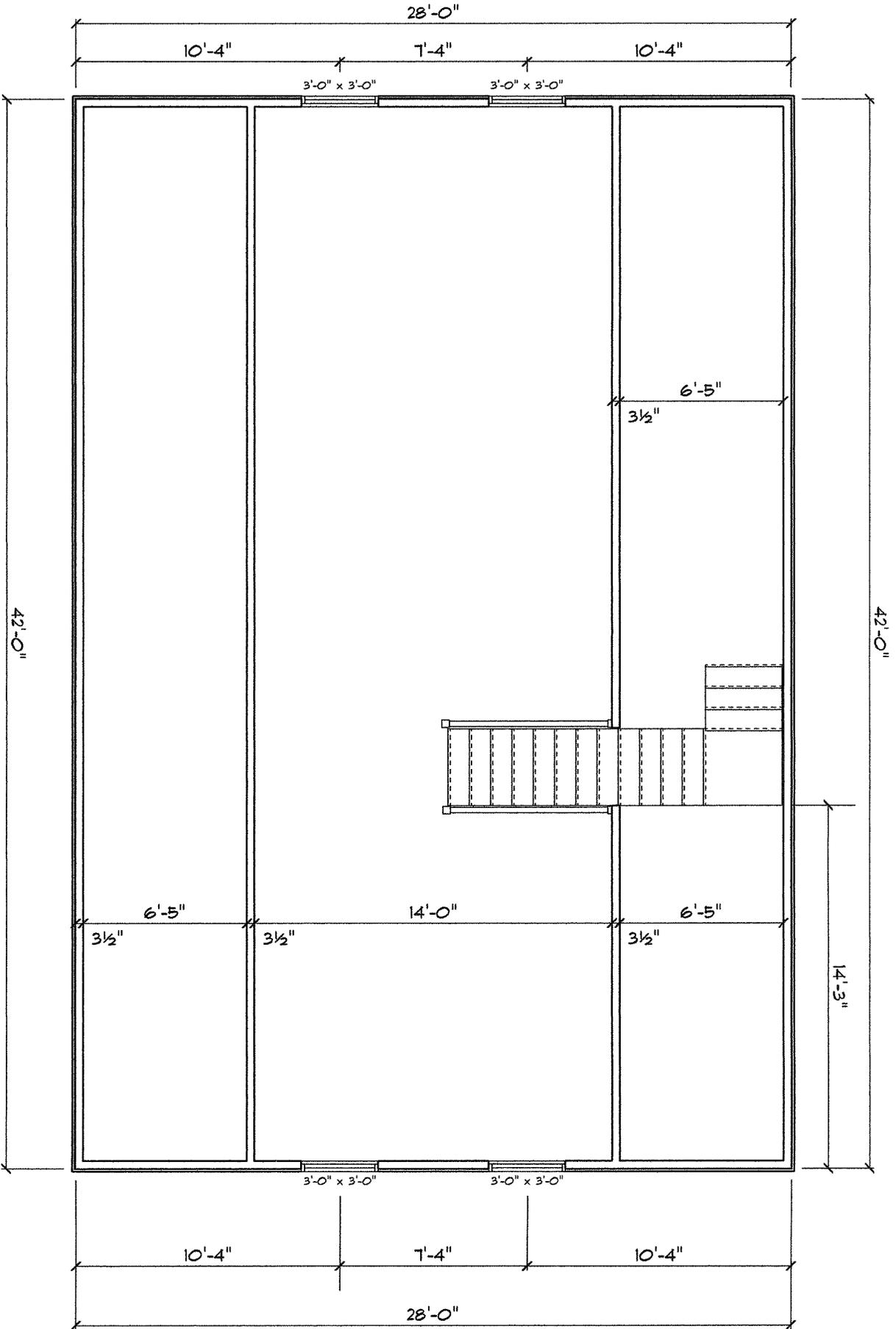
**HEART OF THE NORTH
SURVEYING OF HAYWARD, INC.**

10339N DUFFY ROAD
HAYWARD, WI 54843
WWW.HONSURVEYING.COM
PH: 715/634-2442
FAX: 715/634-6444

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MAIN FLOOR PLAN



UPPER FLOOR PLAN
 SCALE: 3/16" = 1'-0"

42'-0"

42'-0"

14'-3"

28'-0"

10'-4"

7'-4"

10'-4"

3'-0" x 3'-0"

3'-0" x 3'-0"

6'-5"

3 1/2"

6'-5"

14'-0"

6'-5"

3 1/2"

3 1/2"

3 1/2"

3'-0" x 3'-0"

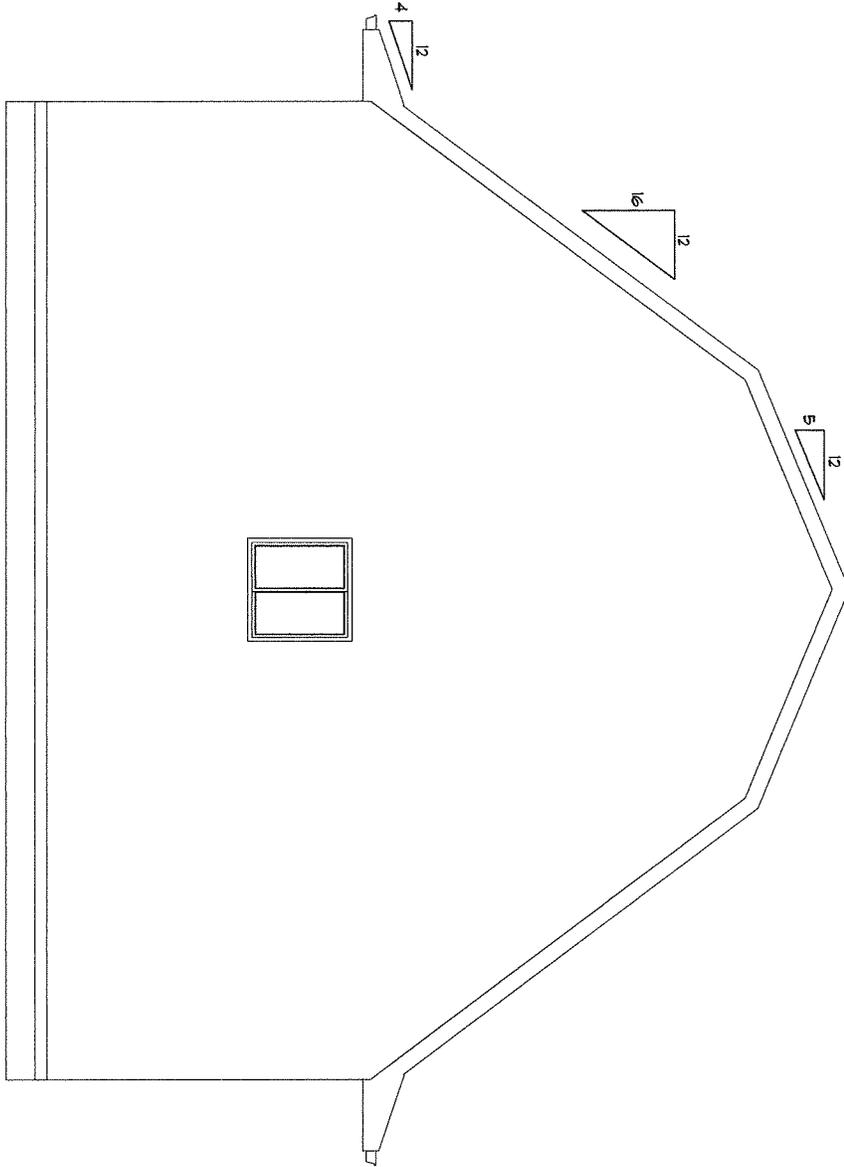
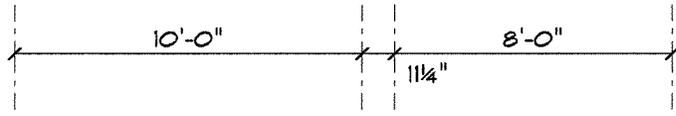
3'-0" x 3'-0"

10'-4"

7'-4"

10'-4"

28'-0"



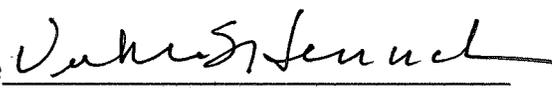
Zoning Consulting/Real Estate Services LLC Disclosure

1. I (we) acknowledge that North Star Realtors and John Podlesny, (John Podlesny owner of North Star Realtors), have no interest in Zoning Consulting/Real Estate Services LLC as Zoning Consulting/Real Estate Services LLC and Mike Furtak, owner of Zoning Consulting/Real Estate Services LLC are completely independent of North Star Realtors for this zoning application transaction.
2. Mike Furtak is a licensed Realtor in Wisconsin working as a sales associate for North Star Realtors.
3. I (we) grant permission to Mike Furtak and all vendors whose services are required to obtain the desired zoning permits access to the subject property/properties.
4. I (we) authorize Mike Furtak of Zoning Consulting/Real Estate Services LLC to act as our agent to represent our interests during the application process to obtain the required zoning permit(s).
5. I (we) acknowledge that we are responsible for all costs of services provided by vendors and/or other entities to obtain the required permit(s).
6. I (we) hereby understand that by contracting Mike Furtak and Zoning Consulting/Real Estate Services LLC there is **NO GUARANTEE** the desired permit(s) will be approved by the issuing authorities. Additionally there is no guarantee to the timeframe for the issuance of permits.
7. It is the responsibility of the property owner/contractor/plumber to obtain a Uniform Dwelling Code (UDC) or sanitary permit if required.
8. Mike Furtak and Zoning Consulting /Real Estate Services LLC are only responsible to attempt to gain issuance of the necessary Land Use permit as agreed to. Mike Furtak and Zoning Consulting/Real Estate Services LLC will not act as a general contractor or project manager.

The undersigned parties have read and understand the above terms of this disclosure and agree to abide by all terms.

Signature 
Print Name: Gary R Herrickson

Date 5/22/21

Signature 
Print Name: Vicki S Herrickson

Date 5/22/21

Real Estate Bayfield County Property Listing

Today's Date: 4/8/2021

Property Status: Current

Created On: 3/15/2006 1:15:09 PM

Description Updated: 4/10/2006

Tax ID: 10425
PIN: 04-012-2-43-07-22-1 00-278-09000
Legacy PIN: 012120404000
Map ID:
Municipality: (012) TOWN OF CABLE
STR: S22 T43N R07W
Description: SILVER BIRCH ADDITION TO WILDE RIVER LOT 9 1399
Recorded Acres: 0.870
Calculated Acres: 0.774
Lottery Claims: 0
First Dollar: Yes
Zoning: (R-RB) Residential-Recreational Business
ESN: 108

Tax Districts Updated: 3/15/2006

1 STATE
04 COUNTY
012 TOWN OF CABLE
041491 SCHL-DRUMMOND
001700 TECHNICAL COLLEGE

Recorded Documents Updated: 3/15/2006

CONVERSION
Date Recorded: 515-205;590-162

Ownership Updated: 3/15/2006

GARY R & VICKI S HENRICKSON DAVENPORT IA

Billing Address:

GARY R & VICKI S HENRICKSON
2225 S PIONEER
DAVENPORT IA 52804

Mailing Address:

GARY R & VICKI S HENRICKSON
2225 S PIONEER
DAVENPORT IA 52804

Site Address * indicates Private Road

16685 ASPEN CT BARNES 54873

Property Assessment Updated: 6/17/2020

2021 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	0.870	4,400	145,700

2-Year Comparison

	2020	2021	Change
Land:	4,400	4,400	0.0%
Improved:	145,700	145,700	0.0%
Total:	150,100	150,100	0.0%

Property History

N/A

Gary 563-343-0673

Vicki 563-343-0662

Nelson Surveying

\$70,000

checks

signatures

No H₂O

No habitation

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0163** Issued To: **Gary & Vicki Henrickson**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **22** Township **43** N. Range **7** W. Town of **Cable**

Gov't Lot Lot **1** Block Subdivision CSM# **2173**

For: **Residential Accessory Structure: [1- Story; Garage (42' x 28') = 1,176 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not for human habitation or sleeping. If pressurized water enters structure get septic permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 8, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

RECEIVED
 Date Stamp (Received)
 MAY 17 2021
 Bayfield Co.
 Planning and Zoning Agency

ENTERED

Permit #:	21-0169
Date:	6-15-21
Amount Paid:	\$75 5-17-21
Refund:	

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Owner's Name: DWAYNE JACOBS		Mailing Address: 44045 LAKE AV.		City/State/Zip: CABLE WI. 54821		Telephone: 715-794-2727		
Address of Property: 16890 S. RIDGE		City/State/Zip: CABLE WI. 54821		Cell Phone: 715 681 0007			Plumber Phone:	
Contractor:		Contractor Phone:		Plumber:		Plumber Phone:		
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:		Agent Mailing Address (include City/State/Zip):			Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	
PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID#		Recorded Document: (Showing Ownership)				
1/4, 1/4		10584 + 10585		920 778				
Gov't Lot	Lot(s)	CSM	Vol & Page	CSM Doc #	Lot(s) #	Block #	Subdivision: South Ridge of Wild River	
	44						Lot Size	Acreage
Section 22	Township 43N	Range 07W	Town of: CABLE					1.13

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline: _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline: _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ 10,200	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input checked="" type="checkbox"/> SKIDS	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input type="checkbox"/> Year Round	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> STORAGE		<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
					<input checked="" type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 28	Width: 12	Height: 8

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2 nd) Porch	(X)	
		with a Deck	(X)	
<input type="checkbox"/> Commercial Use		with (2 nd) Deck	(X)	
		with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Accessory Building (explain) STORAGE	(12 x 28)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Dwayne Jacobs
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 5/13/21

Authorized Agent: _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____

Address to send permit _____

Attach
 Copy of Tax Statement

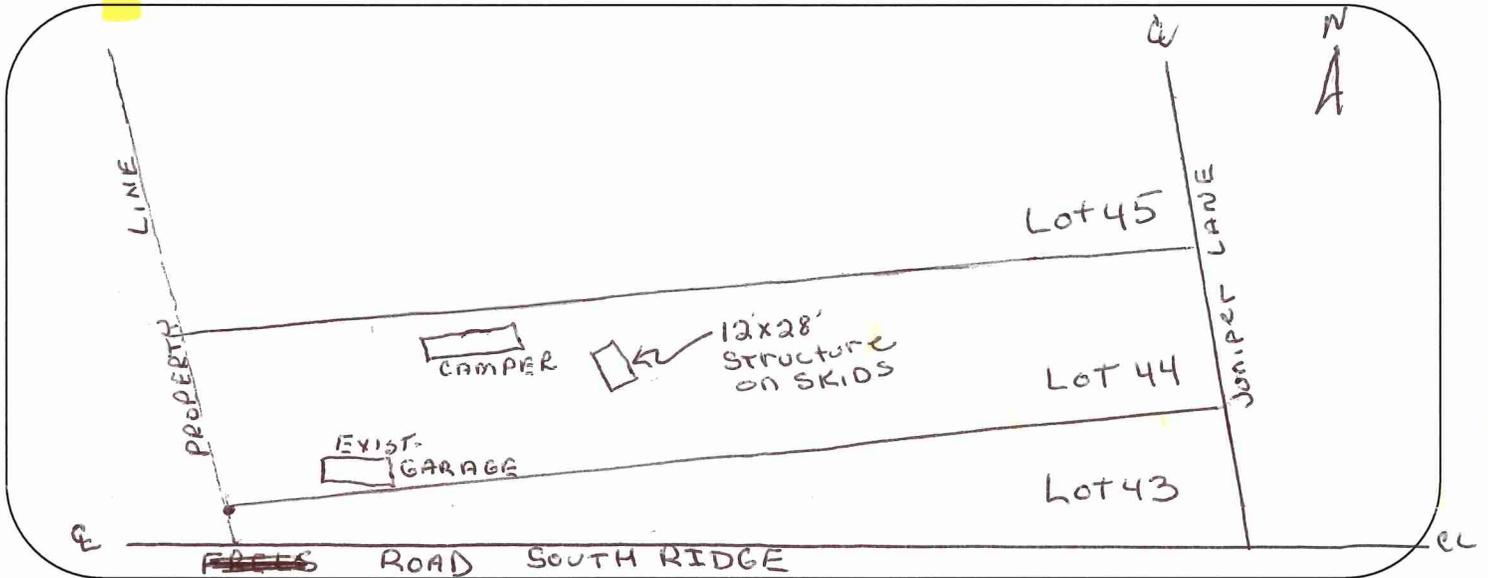
If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(* Driveway and (*) Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (*) Privy (P)**
- (6) Show any (*): **(* Lake; (*) River; (*) Stream/Creek; or (*) Pond**
- (7) Show any (*): **(* Wetlands; or (*) Slopes over 20%**



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	228 Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	198 Feet	Setback from the River, Stream, Creek	± 800 Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	52 Feet	Setback from Wetland	NA Feet
Setback from the South Lot Line	126 Feet	20% Slope Area on the property	FLAT <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the West Lot Line	101 Feet	Elevation of Floodplain	2 Feet
Setback from the East Lot Line	± 400 Feet	Setback to Well	? Feet
Setback to Septic Tank or Holding Tank	Feet		
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
 For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
 The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

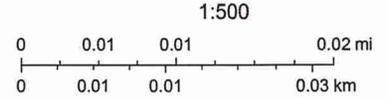
Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-0169		Permit Date: 6-15-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record:			Zoning District (R-1)	
			Lakes Classification (NA)	
Date of Inspection: 6/10/21	Inspected by: [Signature]		Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)				
Not for Human Habitation or sleeping If pressurized water enters structure get septic permits				
Signature of Inspector: [Signature]			Date of Approval: 6/10/21	
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

Bayfield County, WI



6/7/2021, 3:10:11 PM

- | | | | |
|--------------------------------------|-----------------------------|--------------------------------|----------------|
| Building Footprint Outline 2009-2015 | Douglas Co Parcels | Section Lines | County |
| Changed | Rivers | Government Lot | Town |
| Demolished | Lakes | Municipal Boundary | CFR |
| Existing | Tie Lines | Red Cliff Reservation Boundary | Private |
| New | Meander Lines | All Roads | Survey Maps |
| Unknown | Approximate Parcel Boundary | Federal | UnRecorded Map |
| Ashland Co Parcels | | State | Recorded Map |



Bayfield County, Bayfield County Land Records

Description Updated: 8/11/2005

Tax ID: 10585
PIN: 04-012-2-43-07-22-4 00-285-44000
 Legacy PIN: 012122007000
 Map ID:
 Municipality: (012) TOWN OF CABLE
 STR: S22 T43N R07W
 Description: SOUTHRIDGE ADD TO WILDE RIVER LOT 44 IN V.920 P.778 1710 IM 2005R-500027
 Recorded Acres: 1.130
 Calculated Acres: 1.157
 Lottery Claims: 0
 First Dollar: Yes
 Zoning: (R-RB) Residential-Recreational Business
 SN: 108

Tax Districts Updated: 3/15/2006

STATE
 COUNTY
 TOWN OF CABLE
 SCHL-DRUMMOND
 TECHNICAL COLLEGE

Recorded Documents Updated: 3/15/2006

CONVERSION
 Date Recorded: 500027 780-169;818-190;920-778

Ownership Updated: 3/15/2006

DWAYNE G & JUDITH M JACOBS CABLE WI

Billing Address:
 DWAYNE G & JUDITH M JACOBS
 44045 LAKE AVE
 CABLE WI 54821

Mailing Address:
 DWAYNE G & JUDITH M JACOBS
 44045 LAKE AVE
 CABLE WI 54821

Site Address * indicates Private Road
 16890 S RIDGE RD CABLE 54821

Property Assessment Updated: 6/17/2020

2021 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.130	5,700	17,300

2-Year Comparison

	2020	2021	Change
Land:	5,700	5,700	0.0%
Improved:	17,300	17,300	0.0%
Total:	23,000	23,000	0.0%

Property History

N/A

BAYFIELD COUNTY PLANNING & ZONING DEPARTMENT



Bayfield County Courthouse
Post Office Box 58
117 East Fifth Street
Washburn, WI 54891

Telephone: (715) 373-6138
Fax: (715) 373-0114
E-mail: zoning@bayfieldcounty.org
Web Site: www.bayfieldcounty.org/zoning

TO: Wayne Jacobs
FROM: Bayfield County Planning and Zoning Department
DATE: 5/21/21
RE: Incomplete application(s)

Dear Applicant:

The permit application submitted to this office is not complete and is therefore being held in our office. Only **complete** applications can be accepted for permit issuance. Please provide the following checked item(s).

- Additional Fee(s) required. \$ _____ for _____
- Original Application is required Plot plan with relevant location(s) and distance(s) is required
- The Town Board Recommendation (TBA) Form is required.
- Signature of property owner or authorized agent is required.
- Application was signed by an agent, **written** authorization with signature from property owner is required
- Accurate legal description of subject property is required
- Explain what is being requested (what are you building and/or asking for) Sq. footage is required
- Copy of property tax statement or Warranty/Quit claim deed is required (must be recorded by Reg of Deeds)
- Soil Test Soil Boring Privy Paperwork Sanitary is required
- Septic System Verification Form Letter from Sanitary District Other Sanitary _____
- Certified Survey Map (CSM) is required.
- All names **and** addresses of adjacent property owners is required
- Mitigation is required Mitigation Fee is required \$ _____
- Flood Plain Analysis is needed Info from any other agency is required (explain) _____
- Please fill in all highlighted items Separate Application required for _____
- Other _____

Please contact our office if you have any questions or comments, and **be advised applications expire and fees are non-refundable 1 year from the date received in our office. You will have to reapply and pay the fees again if we do not receive the missing information.**

Thank you for your cooperation.

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **None**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0169** Issued To: **Dwayne & Judith Jacobs**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **22** Township **43** N. Range **7** W. Town of **Cable**

Gov't Lot Lot **44** Block Subdivision **Southridge Add to Wild River** CSM#

For: **Residential Accessory Structure: [1- Story; Storage (12' x 28') = 336 sq. ft.]**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not for human habitation or sleeping. If pressurized water enters structure get septic permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 15, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

RECEIVED
 Date Stamp (Received)
 MAY 20 2021
 Bayfield Co. Zoning Dept.



Permit #:	21-0177
Date:	6-17-21
Amount Paid:	\$900 5-21-21 \$426-17-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER									
Owner's Name: GARY LEATH			Mailing Address: 7881 133RD ST SE			City/State/Zip: Bloomington Prairie MN			Telephone:
Address of Property: 22935 MISSIONARY PT CAVE RD			City/State/Zip: Bloomington Prairie MN 55917			Cell Phone:			
Contractor: Bayfield Const.			Contractor Phone: 715-287-1645			Plumber: Brown Plumbing & Heating			Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Todd Benney			Agent Phone: Above			Agent Mailing Address (include City/State/Zip): P.O. Box 10 Bayfield WI			Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT LOCATION		Legal Description: (Use Tax Statement)				Tax ID# 25028		Recorded Document: (Showing Ownership)	
1/4, 1/4		Gov't Lot	Lot(s) 14	CSM	Vol & Page 763 338 810	CSM Doc #	Lot(s) # 14	Block #	Subdivision: Pt of Missionary Pt.
Section 3, Township 43 N, Range 6 W			Town of: Cable			Lot Size .62 Acres		Acreage	

<input checked="" type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : 75 FT. feet	Is your Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage? If yes---continue →	Distance Structure is from Shoreline : feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$300,000.00 + 14,000	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type: MOUND	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type:	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		<input type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input type="checkbox"/> Year Round	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None		

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 26' x 48'	Width: 26'-0"	Height: 30'-0"

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	(26 X 48)	1248
	<input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) w/ Full Basement	(X)	
	with Loft	(30 X 24)	760
	with a Porch	(12 X 12)	144
	with (2nd) Porch	(X)	
	with a Deck	(7 X 10)	70
<input type="checkbox"/> Commercial Use	with (2nd) Deck	(X)	
	with Attached Garage	(27 X 26)	624
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/> Mobile Home (manufactured date)	(X)	
	<input type="checkbox"/> Addition/Alteration (explain)	(X)	
	<input type="checkbox"/> Accessory Building (explain)	(X)	
	<input type="checkbox"/> Accessory Building Addition/Alteration (explain)	(X)	
	<input type="checkbox"/> Special Use: (explain)	(X)	
<input type="checkbox"/> Conditional Use: (explain)	(X)		
<input type="checkbox"/> Other: (explain)	(X)		

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____ Date: _____
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: _____ Date: 3/21/2021
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

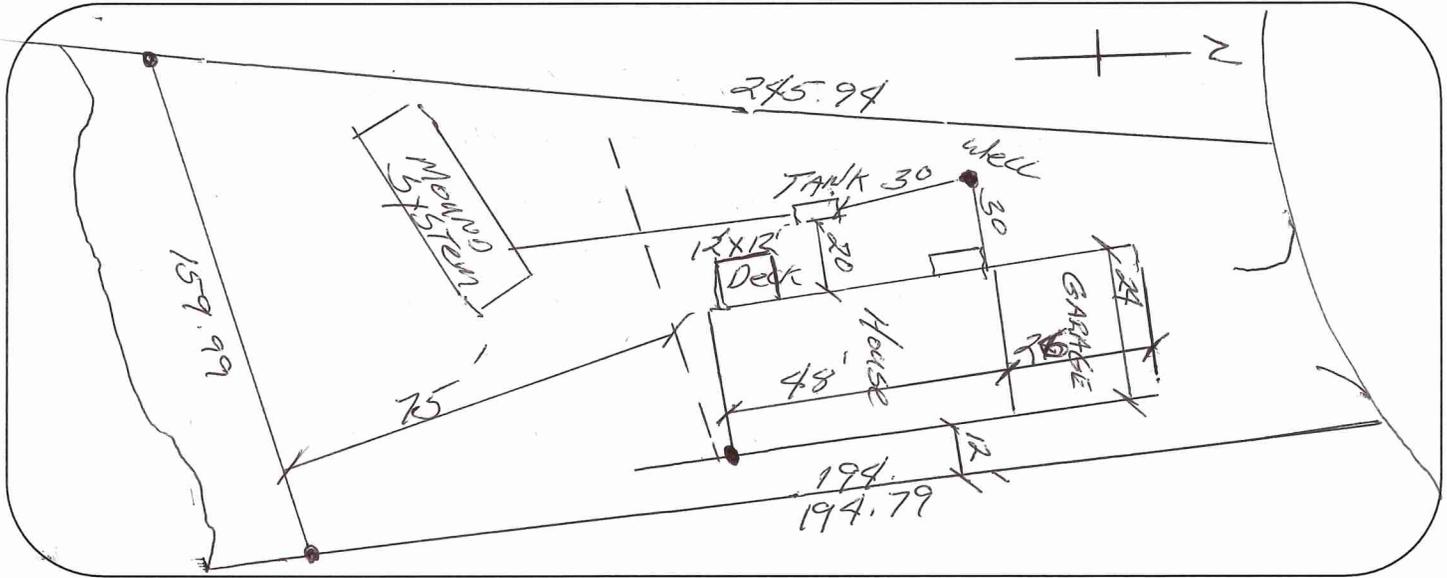
Address to send permit: P.O. Box 10 Bayfield WI 54814
 Attach Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(* Driveway and (* Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)**
- (6) Show any (*): **(* Lake; (* River; (* Stream/Creek; or (* Pond**
- (7) Show any (*): **(* Wetlands; or (* Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	60 Feet	Setback from the Lake (ordinary high-water mark)	75 Feet
Setback from the Established Right-of-Way	35 Feet	Setback from the River, Stream, Creek	- Feet
		Setback from the Bank or Bluff	- Feet
Setback from the North Lot Line	35 Feet	Setback from Wetland	Feet
Setback from the South Lot Line	80 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the West Lot Line	30 Feet	Elevation of Floodplain	Feet
Setback from the East Lot Line	12 Feet		
Setback to Septic Tank or Holding Tank	20 Feet	Setback to Well	30 Feet
Setback to Drain Field	50 Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

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Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-0177		Permit Date: 6-17-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:		Zoning District (R-1)		
		Lakes Classification (1)		
Date of Inspection: 6/1/21	Inspected by: [Signature]	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If <u>No</u> they need to be attached.)				
Maintain setbacks Get Required UDC Inspections				
Signature of Inspector: [Signature]				Date of Approval: 6/9/21
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

**APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received)

Permit #:	
Date:	
Amount Paid:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: Gary Leuth		Mailing Address:			City/State/Zip:		Telephone:	
Address of Property:		City/State/Zip:			Cell Phone:			
Contractor:		Contractor Phone:		Plumber:		Plumber Phone:		
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:		Agent Mailing Address (include City/State/Zip):			Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	
PROJECT LOCATION	Legal Description: (Use Tax Statement)			Tax ID#		Recorded Document: (Showing Ownership)		
1/4, 1/4	Gov't Lot	Lot(s)	CSM	Vol & Page	CSM Doc #	Lot(s) #	Block #	Subdivision:
Section _____, Township _____ N, Range _____ W				Town of:		Lot Size	Acreage	

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline: _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage? If yes---continue →	Distance Structure is from Shoreline: _____ feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ 14,000	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		<input type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____		<input type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
		<input type="checkbox"/> _____		<input type="checkbox"/> None		

Existing Structure: (if addition, alteration or business is being applied for)	Length: 24	Width: 48	Height: 8 Basement
Proposed Construction: (overall dimensions)	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.) <i>Basement</i>	(24 X 48)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2 nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2 nd) Deck	(X)	
<input type="checkbox"/> Municipal Use		with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, <u>or</u> <input type="checkbox"/> sleeping quarters, <u>or</u> <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	Conditional Use: (explain) _____	(X)		
	Other: (explain) _____	(X)		

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date: _____

Date: 6/6/2021

Address to send permit: _____

Attach Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N)** on Plot Plan
- (3) Show Location of (*): **(*) Driveway and (*) Frontage Road** (Name Frontage Road)
- (4) Show: **All Existing Structures** on your Property
- (5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT)** and/or **(*) Privy (P)**
- (6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
- (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet		
Setback from the South Lot Line	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
 For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
 The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #:		Permit Date:		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) _____ <input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) _____ <input type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	Was Property Surveyed	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	
Inspection Record:		Zoning District ()		
		Lakes Classification ()		
Date of Inspection:	Inspected by:	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If <u>No</u> they need to be attached.)				
Signature of Inspector:				Date of Approval:
Hold For Sanitary: <input type="checkbox"/> _____	Hold For TBA: <input type="checkbox"/> _____	Hold For Affidavit: <input type="checkbox"/> _____	Hold For Fees: <input type="checkbox"/> _____	<input type="checkbox"/> _____

Letter for delegation of signature of authority

April 12, 2023

Subject: **Bayfield County Permits**

Building Permit and Sanitary septic system Permit
Delegation of Signatory Authority

To whom it may Concern:

This is to notify you that the following individual(s) have signature authority for permit applications and other authorizations requested by Bayfield County or other jurisdictions in connection with the cabin- residence to be constructed in 2021, at 22945 Missionary Point Circle, on Lake Namakagon, Wisconsin by Gary and Janis Lueth of 7881 133rd St., Blooming Prairie, MN 55017

Todd Bonney acting on behalf of Bayfield Construction, P.O. Box 10, Bayfield Wisconsin, 54814

Sincerely,



Gary Lueth,



2/1/19 No disturbance of drainage 2/1/19

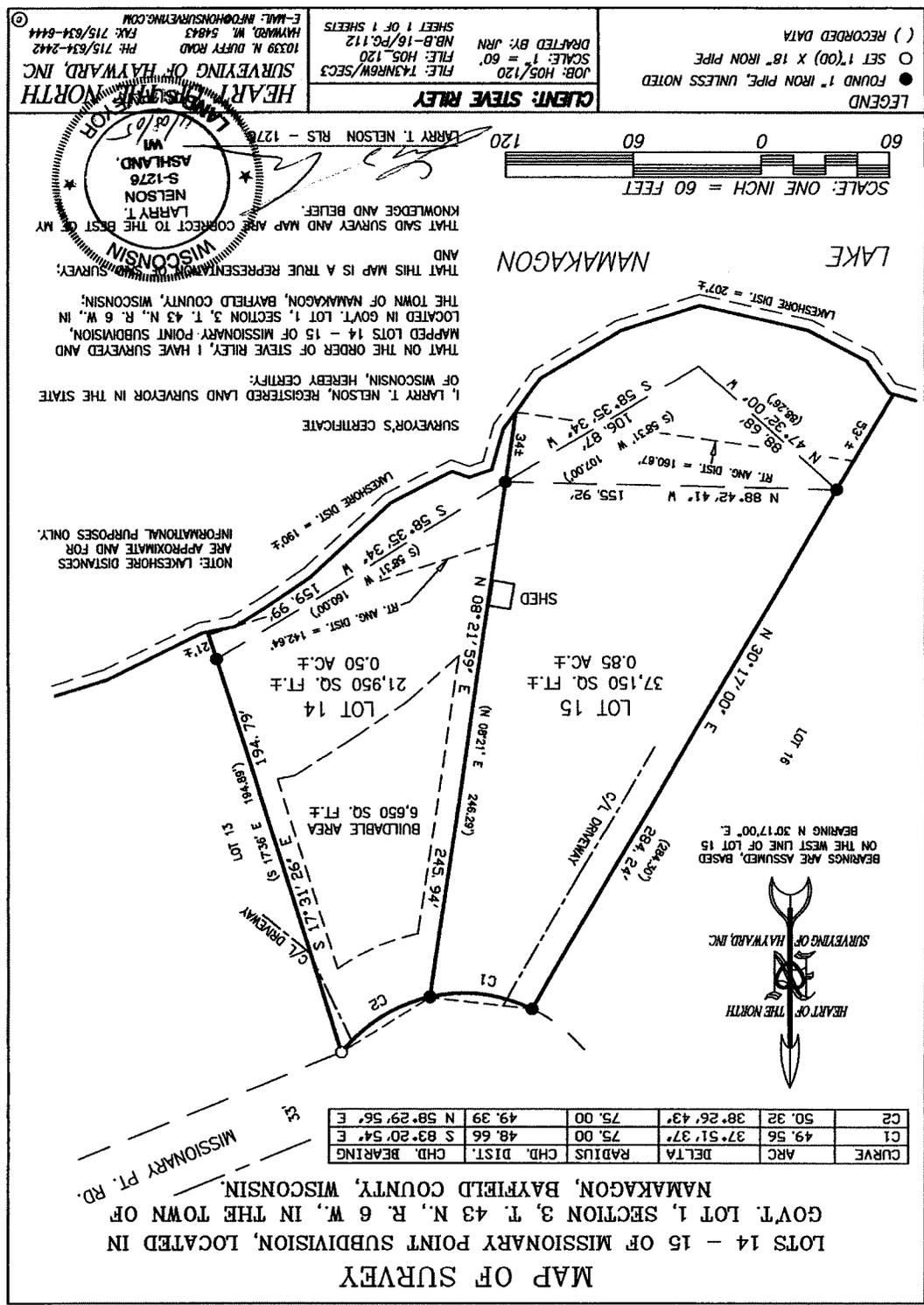




3-43-6

GL 1

eeeh#



CLIENT: STEVE RILEY
 JOB: H05/120
 SCALE: 1" = 60'
 DRAFTED BY: JRN
 FILE: T43NR6W/SECS
 N.B.-16/PG.112
 SHEET 1 OF 1 SHEETS
 HAYWARD, WI. 54843
 10339 N. DUFFY ROAD
 PH: 715/534-2442
 FAX: 715/534-6444
 E-MAIL: INFO@HAYWARDINC.COM

HEART OF THE NORTH SURVEYING OF HAYWARD, INC.

LEGEND
 ● FOUND 1" IRON PIPE, UNLESS NOTED
 ○ SET 1"(00) X 18" IRON PIPE
 () RECORDED DATA

SCALE: ONE INCH = 60 FEET

0 60 120

LARRY T. NELSON, REGISTERED LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFIES:
 THAT ON THE ORDER OF STEVE RILEY, I HAVE SURVEYED AND MAPPED LOTS 14 - 15 OF MISSIONARY POINT SUBDIVISION, LOCATED IN GOV'T. LOT 1, SECTION 3, T. 43 N., R. 6 W., IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN; THAT THIS MAP IS A TRUE REPRESENTATION OF THE SURVEY; AND THAT SAID SURVEY AND MAP ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SURVEYOR'S CERTIFICATE
 I, LARRY T. NELSON, REGISTERED LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFY:
 NOTE: LAKESHORE DISTANCES ARE APPROXIMATE AND FOR INFORMATIONAL PURPOSES ONLY.

HEART OF THE NORTH SURVEYING OF HAYWARD, INC.
 BEARINGS ARE ASSUMED, BASED ON THE WEST LINE OF LOT 15 BEARING N 30° 17' 00" E.

WISCONSIN
 LARRY T. NELSON
 S-1276
 ASHLAND, WI
 11/08/09

MISSIONARY PT. RD.

HEART OF THE NORTH SURVEYING OF HAYWARD, INC.

Real Estate Bayfield County Property Listing

Today's Date: 5/20/2021

Property Status: Current

Created On: 3/15/2006 1:15:49 PM

 **Description** Updated: 9/14/2020

Tax ID: 25028
PIN: 04-034-2-43-06-03-1 00-222-14000
 Legacy PIN: 034110509000
 Map ID:
 Municipality: (034) TOWN OF NAMAKAGON
 STR: S03 T43N R06W
 Description: PLAT OF MISSIONARY POINT LOT 14 IN DOC 2020R-584135 840 (JANIS A LUETH LIVING T TRUST DTD 03/04/2014)
 Recorded Acres: 0.620
 Calculated Acres: 0.623
 Lottery Claims: 0
 First Dollar: No
 Zoning: (R-1) Residential-1
 ESN: 123

 **Tax Districts** Updated: 3/15/2006

1	STATE
04	COUNTY
034	TOWN OF NAMAKAGON
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE

 **Recorded Documents** Updated: 5/25/2006

 **WARRANTY DEED**
 Date Recorded: 9/8/2020 2020R-584135

 **WARRANTY DEED**
 Date Recorded: 1/29/2007 2007R-511964 963-338

 **FINDINGS OF FACT AND CONCLUSIONS OF LAW**
 Date Recorded: 1/11/2007

 **JUDGMENT**
 Date Recorded: 10/23/2006 2006R-509984 956-167

 **LAND CONTRACT**
 Date Recorded: 3/16/2006 2006R-505621 940-185

 **Ownership** Updated: 9/14/2020

JANIS A & GARY R LUETH TRUSTEES BLOOMING PRAIRIE MN

Billing Address:	Mailing Address:
JANIS A & GARY R LUETH TRUSTEES	JANIS A & GARY R LUETH TRUSTEES
7881 133RD ST SE	7881 133RD ST SE
BLOOMING PRAIRIE MN 55917	BLOOMING PRAIRIE MN 55917

 **Site Address** * indicates Private Road

22945 MISSIONARY POINT DR CABLE 54821

 **Property Assessment** Updated: 5/17/2010

2021 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	0.620	191,700	0

2-Year Comparison

	2020	2021	Change
Land:	191,700	191,700	0.0%
Improved:	0	0	0.0%
Total:	191,700	191,700	0.0%

 **Property History**

N/A

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **21-69S**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0177** Issued To: **Gary & Janis Lueth / Todd Bonney, Agent**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **3** Township **43** N. Range **6** W. Town of **Namakagon**

Gov't Lot Lot **14** Block Subdivision **Plat of Missionary Point** CSM#

For: **Residential Use:** [**2- Story; Residence (with basement) (26' x 48') = 1,248 sq. ft.;** **Loft (30' x 24) = 700 sq. ft.;** **Porch (12' x 12') = 144 sq. ft.;** **Deck (4' x 10') = 40 sq. ft.;** **Attached Garage (24' x 26') = 624 sq. ft.] Total Overall = 2,056 sq. ft.**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Maintain setbacks. Get required UDC inspections.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 17, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TC:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN
 RECEIVED
 Date Stamp (Received)
 APR 08 2021
 Bayfield Co. Zoning Dept.

Permit #: 21-0191
 Date: 6-24-21
 Amount Paid: \$350 4-8-21
 Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: <u>Robert & Corinne Rasmussen</u>		Mailing Address: <u>42890 LAKE RIDGE RD</u>			City/State/Zip: <u>CABLE, WI 54821</u>		Telephone: <u>715-7942140</u>	
Address of Property: <u>13380 SPRUCE ST</u>		City/State/Zip: <u>CABLE, WI 54821</u>					Cell Phone: <u>508-0500</u>	
Contractor: <u>SELF</u>		Contractor Phone:		Plumber:		Plumber Phone:		
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No		
PROJECT LOCATION	Legal Description: (Use Tax Statement)			Tax ID# <u>38469</u>		Recorded Documents: <u>2009R-525401 Loss</u> <u>2010R-530751 + 2021R-587774</u>		
<u>1/4</u> , <u>1/4</u>	Gov't Lot	Lot(s)	CSM	Vol & Page	CSM Doc #	Lot(s) # <u>3</u>	Block # <u>7</u>	
Section <u>18</u> , Township <u>43</u> N, Range <u>7</u> W	Town of: <u>CABLE,</u>			Subdivision: <u>ASSESSOR'S Plat #2</u>		Lot Size: <u>1.089 Ac</u>		

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ <u>170,000</u>	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: <u>CITY SEWER</u>	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input checked="" type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	Principal Structure (first structure on property) <u>Irregular</u>	(<u>48 X 50</u>)	<u>1,946</u>
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
	<input type="checkbox"/>	with Loft	(X)	
	<input type="checkbox"/>	with a Porch	(X)	
	<input type="checkbox"/>	with (2nd) Porch	(X)	
<input checked="" type="checkbox"/> Commercial Use	<input type="checkbox"/>	with a Deck	(X)	
	<input type="checkbox"/>	with (2nd) Deck	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
<input type="checkbox"/>	Conditional Use: (explain) _____	(X)		
<input type="checkbox"/>	Other: (explain) _____	(X)		

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Robert Rasmussen Corinne Rasmussen Date 2/9/21
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter of authorization must accompany this application)

Authorized Agent: _____ Date _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

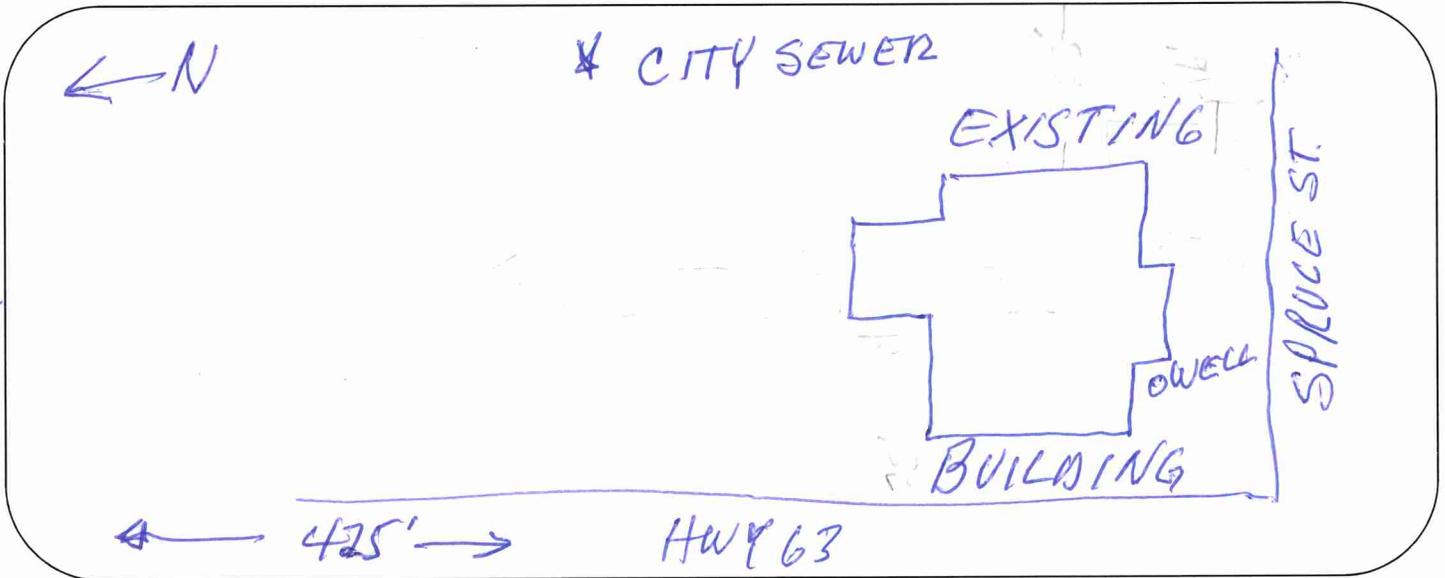
Address to send permit 42890 LAKE RIDGE RD Attach Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(* Driveway and (* Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)**
- (6) Show any (*): **(* Lake; (* River; (* Stream/Creek; or (* Pond**
- (7) Show any (*): **(* Wetlands; or (* Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet		
Setback from the South Lot Line	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number: <i>City</i>	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: <i>21-091</i>		Permit Date: <i>6-24-21</i>		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:				Zoning District <i>(C)</i>
				Lakes Classification <i>(N/A)</i>
Date of Inspection: <i>4/9/21</i>	Inspected by: <i>APL</i>	Date of Re-Inspection:		
Condition(s): <i>Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)</i>				
<i>- ADHERE TO conditions of Conditional USE permit as recorded 2018R-587027</i>				
<i>- get required UDC inspections + stay current with cable room tax & Public Health Department if applicable</i>				
Signature of Inspector: <i>[Signature]</i>				Date of Approval: <i>6/23/21</i>
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

Agenda Item: I
 Meeting Date: 5-20-21

RECEIVED
 APR 08 2021

APPLICATION FOR CONDITIONAL USE PERMIT

Office Use:
 Zoning District C
 Lakes Class N/A
 Notices Sent _____
 Fee Paid \$350 4-8-21

Bayfield County Planning and Zoning Dept.
 P.O. Box 58 – Washburn, WI 54891
 Phone – (715) 373-6138
 Fax – (715) 373-0114
 e-mail: zoning@bayfieldcounty.org

Bayfield Co. Zoning Dept.

**** Please consult AZA/ Zoning prior to submitting this appl. ****

The Undersigned hereby requests a Conditional Use Permit as follows:

Property Owner: ROBERT L. NASSMUSSEON TRUST Contractor: SELF

Property Address: 13380 SPRUCE ST Authorized Agent _____

CABLE, WI 54821 Agent's Telephone _____

Telephone: 715-794-2140 Written Authorization Attached: Yes () No (X)

Accurate Legal Description involved in this request (specify only the property involved with this application)

PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID#: <u>38469</u>				
_____ 1/4, _____ 1/4, of Section <u>18</u> , Township <u>43</u> N, Range <u>7</u> W		Town of: <u>CABLE</u> Lot Size: <u>110' x 425'</u> Acreage: <u>1.680</u>				
Gov't Lot	Lot #	CSM #	Vol. Page	Lot(s) No. <u>3</u>	Block(s) No. <u>7</u>	Subdivision: <u>Assessor's Plat # 2</u>

2009R-525401 Less 2010R-530751 + 2021R-587994

Description from Classification List * Multiple Unit Development

Briefly state what is being requested and why: CONVERT BUILDING (4 UNITS) TO 4 UNITS EITHER PROFESSIONAL OR OFFICE OR APARTMENTS OR ANY COMBINATION THERE OF. + FOOD SHELF SPACE

THE FOLLOWING "**MUST**" BE INCLUDED WITH THIS APPLICATION (or will be returned for completion):

1. Completed Bayfield County **Application for Permit** (8 1/2 x 14)
2. **Pink Form** with applicants portion filled out (**Do Not Send or Give to Town Clerk**)
3. **Appropriate Fees** – (1) Committee (\$350); (2) County (see fee schedule); and (3) (\$30) check payable to: Reg. of Deeds
4. Copy of your **Deed**; Copy of Current **Tax Statement**; and Copy of **Flex Viewer (Map)**
5. Plot Plan (show the area involved, its location, dimensions and location of adjacent property owners)
6. Adjoining property owners **names/addresses** (see reverse side of this form)

PINK FORM: Property Owner **must** send **TOWN BOARD RECOMMENDATION (aka: TBA)** to Zoning Office at the time of application deadline. (This form will be sent by the Zoning Department to the Town Clerk for their recommendation).

Note: Receiving Zoning Committee approval, **does not** allow the start of business or construction, you **must** first obtain your permit(s) from the Zoning Department.

15-062

LIST ADJACENT PROPERTY OWNERS ON THIS FORM:

Provide **names** and **full addresses** of the owners of all property abutting the applicant's property.
(**Note:** Applicant is **solely** responsible for obtaining **accurate**, current names and addresses.)

Attach separate sheet **only if** additional space is needed.

(1) RASMUSSEN / AART HORN LLC (2) _____ (3) _____
42890 LAKE RIDGE RD
CABLE, WI 54821

(4) NORVADG (5) WALN TRUST (6) _____
P.O. Box 67 P.O. Box 86
CABLE, WI 54821 CABLE, WI 54821

(7) CABLE LUMBER & HOME (8) _____ (9) _____
P.O. Box 540
CABLE, WI 54821

(10) HARWARD COMMUNITY CREDIT UNION (11) _____ (12) _____
43620 U.S. HWY 63
CABLE, WI 54821

Have you consulted with an AZA and/or Zoning Dept. prior to applying for permit? Yes (X) No ()

All Structures involved with this application will require an individual land use application and fee

Robert L Rasmussen

Corinne E Rasmussen

Property Owner's Signature
(All owners' must sign)

42890 LAKE RIDGE RD

CABLE, WI 54821

Property Owner's Mailing Address

Agent's Signature

Agent's Address

2/9/21

Date

Website Available
www.bayfieldcounty.org/147

TOWN BOARD RECOMMENDATION – **CONDITIONAL USE** (aka: TBA)

When **Town Board** has completed this form, please mail to:

Bayfield County Planning and Zoning Department
 P.O. Box 58 – Washburn, WI 54891
 Phone – (715) 373-6138
 Fax – (715) 373-0114
 e-mail: zoning@bayfieldcounty.org

Web Site available:
www.bayfieldcounty.org/147

Date Zoning Received: (Stamp Here)

Applicants must give this (Pink) form to the Planning and Zoning Department with their application. Planning and Zoning Dept. must send form and copy of application to the Town Clerk. (It is requested that Board of Adjustment & Zoning Committee public hearing(s) and agenda item(s) receive Town Board's position **prior** to consideration of application.)

THIS FORM MUST BE MAILED TO TOWN CLERK – BY ZONING DEPT.

Property Owner ROBERT L & CORINNE RASMUSSEN TRUST Contractor SELF
 Property Address 13380 SPRUCE ST Authorized Agent _____
CABLE, WI. 54831 Agent's Telephone _____
 Telephone 715-794-7140 Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)
 _____ 1/4 of _____ 1/4, Section 18, Township 43 N., Range 7 W. Town of CABLE

Govt. Lot _____ Lot 3 Block 7 Subdivision ASSESSOR'S PLAT #2 CSM# _____

Volume 200 9A Page 52540 of Deeds Tax I.D.# 38469 Acreage 1.089

Additional Legal Description: LESS 2010R-530751 & 2021R-587994

Applicant: (State what you are asking for) CONVERT BUILDING (4 UNITS) TO 4 UNITS EITHER OFFICE
PROFESSIONAL OR APARTMENTS OR ANY COMBINATION THERE OF
+ FOOD SHELF SPACE Zoning District: C Lakes Classification: _____

We, the Town Board, TOWN OF _____, do hereby recommend to

Table Approval Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: This question applies to Planning & Zoning Committee Applications only; it **does not apply** to Board of Adjustment Applications Yes No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:

1. The Tabled, Approval or Disapproval box checked
2. The Town's reasoning for the tabling, approval or disapproval
3. The **Pink** form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Created: July 2018

Signed: _____
 Chairman: _____
 Supervisor: _____
 Supervisor: _____
 Supervisor: _____
 Clerk: _____
 Date: 5/19/21

Tracy Pooler

From: Kelly Rauch <kelly.rauch@townofcable.com>
Sent: Thursday, May 20, 2021 2:36 PM
To: Tracy Pooler
Subject: Rasmussen

The Tow of Cable approved this application with no conditions.

Thank you
Kelly D. Rauch
Clerk - Town of Cable

BAYFIELD COUNTY PLANNING AND ZONING DEPT.
P.O. BOX 58
WASHBURN, WI. 54891

FEBRUARY 11, 2021

ENVIRONMENTAL IMPACT ANALYSIS/CONDITION USE PERMIT

FOR: ROBERT & CORINE RASMUSSEN TRUST

LOCATED AT: 13380 SPRUCE STREET CABLE, WI.

PROJECT : MULTI UNIT DEVELOPMENT CONDITIONAL USE PERMIT

REQUEST: CONVERT BUILDING FROM PRESENT USE OF FOUR UNITS TO FOUR UNITS OF EITHER PROFESSIONAL SPACE, OFFICE SPACE OR APARTMENTS OR ANY COMBINATION THERE OF.

REDUCT MINIMUM OPEN SPACE REQUIREMENT TO 5,000 SQUARE FEET PER UNIT.

REQUEST THAT THE ZONING COMMITTEE WAIVE THE REQUIREMENT THAT THE APPLICANT PROVIDE AN E.I.A. AS THE BUILDING IS LOCATED WITHIN THE BOUNDARY OF AN UNINCORPORATED VILLAGE ESTABLISHED PURSUANT TO SECTION 13-1-62 (n) OR IN THOSE UNIQUE INSTANCES WHERE THIS TOOL IS DEEMED UNNECESSARY TO AID IN THE DECISION MAKING PROCESS. THIS BUILDING WAS CONSTRUCTED IN 1993 AND HAS HAD NO ENVIRONMENTAL IMPACT (THAT I'm AWARE OF) ON THE PROPERTY.

SINCERELY YOURS:



ROBERT & CORINNE RASMUSSEN
42890 LAKE RIDGE ROAD
CABLE, WI. 54821

TOWN BOARD RECOMMENDATION – **CONDITIONAL USE** (aka: TBA)

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department
 P.O. Box 58 – Washburn, WI 54891
 Phone – (715) 373-6138
 Fax – (715) 373-0114
 e-mail: zoning@bayfieldcounty.org

Web Site available:
 www.bayfieldcounty.org/147

Date Zoning Received: (Stamp Here)

Applicants must give this (Pink) form to the Planning and Zoning Department with their application. Planning and Zoning Dept. must send form and copy of application to the Town Clerk. (It is requested that Board of Adjustment & Zoning Committee public hearing(s) and agenda item(s) receive Town Board's position **prior** to consideration of application.)

THIS FORM MUST BE MAILED TO TOWN CLERK — BY ZONING DEPT.

Property Owner ROBERT L & CORINNE RASMUSSEN TRUST Contractor SELF
 Property Address 13380 SPRUCE ST Authorized Agent _____
CABLE, WI. 54831 Agent's Telephone _____
 Telephone 715-794-7140 Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)

_____ 1/4 of _____ 1/4, Section 18, Township 43 N., Range 7 W. Town of CABLE

Govt. Lot _____ Lot 3 Block 7 Subdivision ASSESSOR'S PLAT #2 CSM# _____

Volume 200 91 Page 52540 of Deeds Tax I.D.# 38469 Acreage 1.089

Additional Legal Description: LESS 2010R-530751 & 2021R-587994

Applicant: (State what you are asking for) Zoning District: C Lakes Classification: _____

CONVERT BUILDING (4 UNITS) TO 4 UNITS EITHER OFFICE PROFESSIONAL OR APARTMENTS OR ANY COMBINATION THERE OF + FOOD SHELF SPACE

We, the Town Board, TOWN OF _____, do hereby recommend to

Table Approval Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: This question applies to Planning & Zoning Committee Applications only; it **does not apply** to Board of Adjustment Applications Yes No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

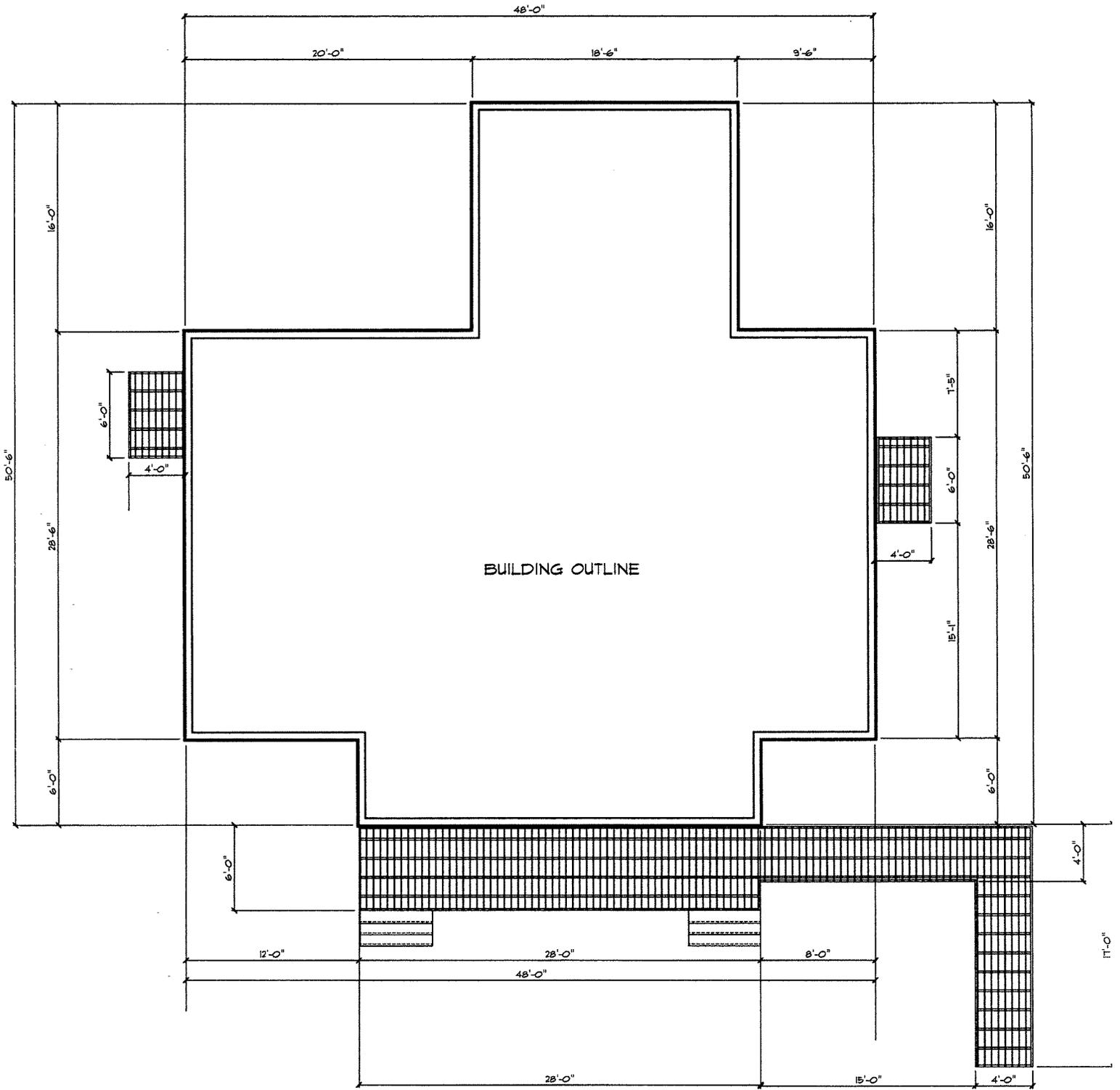
** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:

1. The Tabled, Approval or Disapproval box checked
2. The Town's reasoning for the tabling, approval or disapproval
3. The **Pink** form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

<i>Signed:</i>	
Chairman:	_____
Supervisor:	_____
Supervisor:	_____
Supervisor:	_____
Clerk:	_____
Date: _____	



VILLAGE OF OAKLE

300

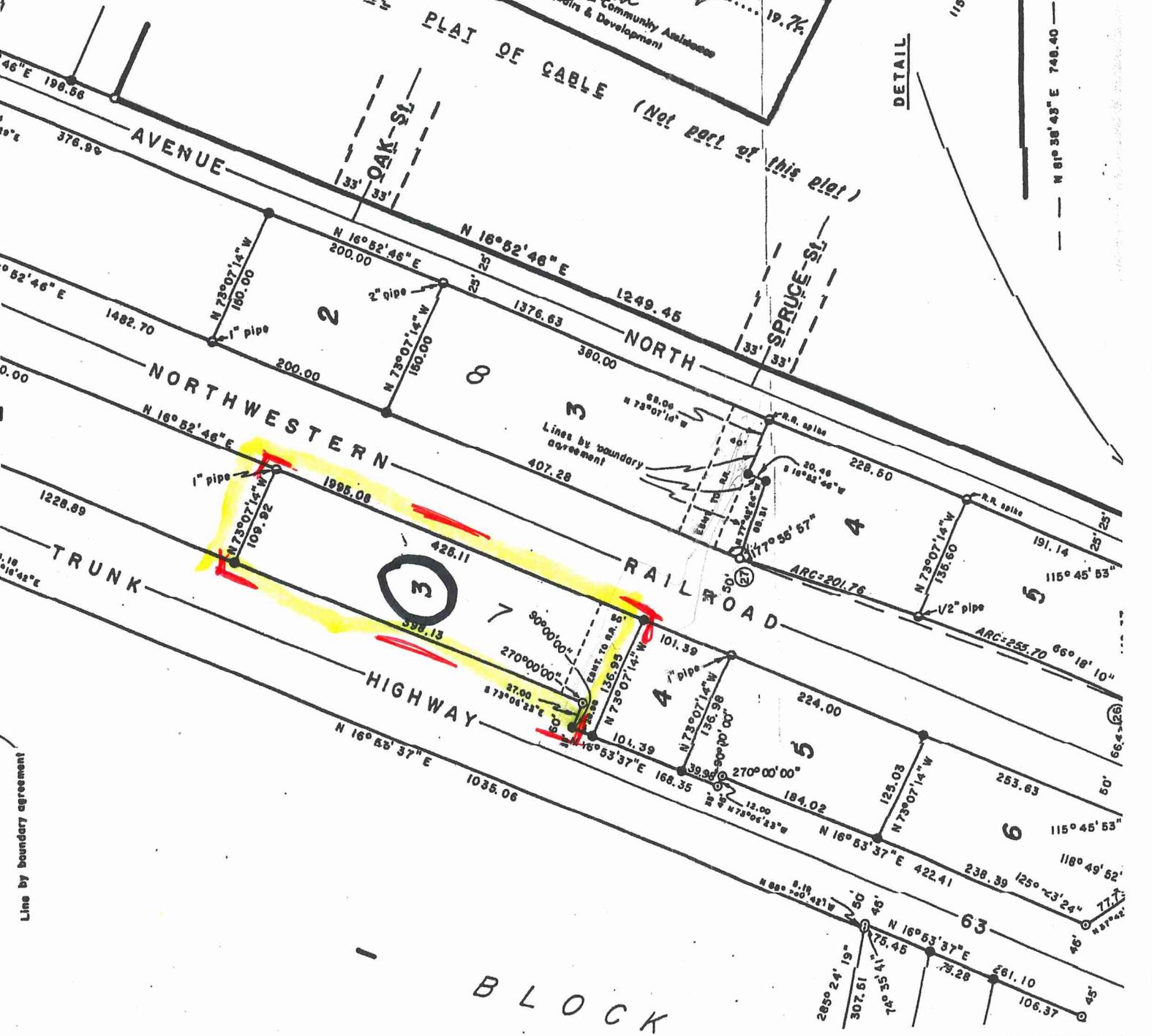
SIGNED: James J. Schmidt
DATED THIS 23rd DAY OF January, 1976.

BLOCK 9
(SEE SHEET 6)

There are no objections to this assessor's plot with respect to applicable provisions of Secs. 236.15 and 236.20 Wis. Stats.
Certified this 15th day of February, 1976.
James J. Schmidt
Director, Regional Planning & Community Analysis
Department of Local Affairs & Development

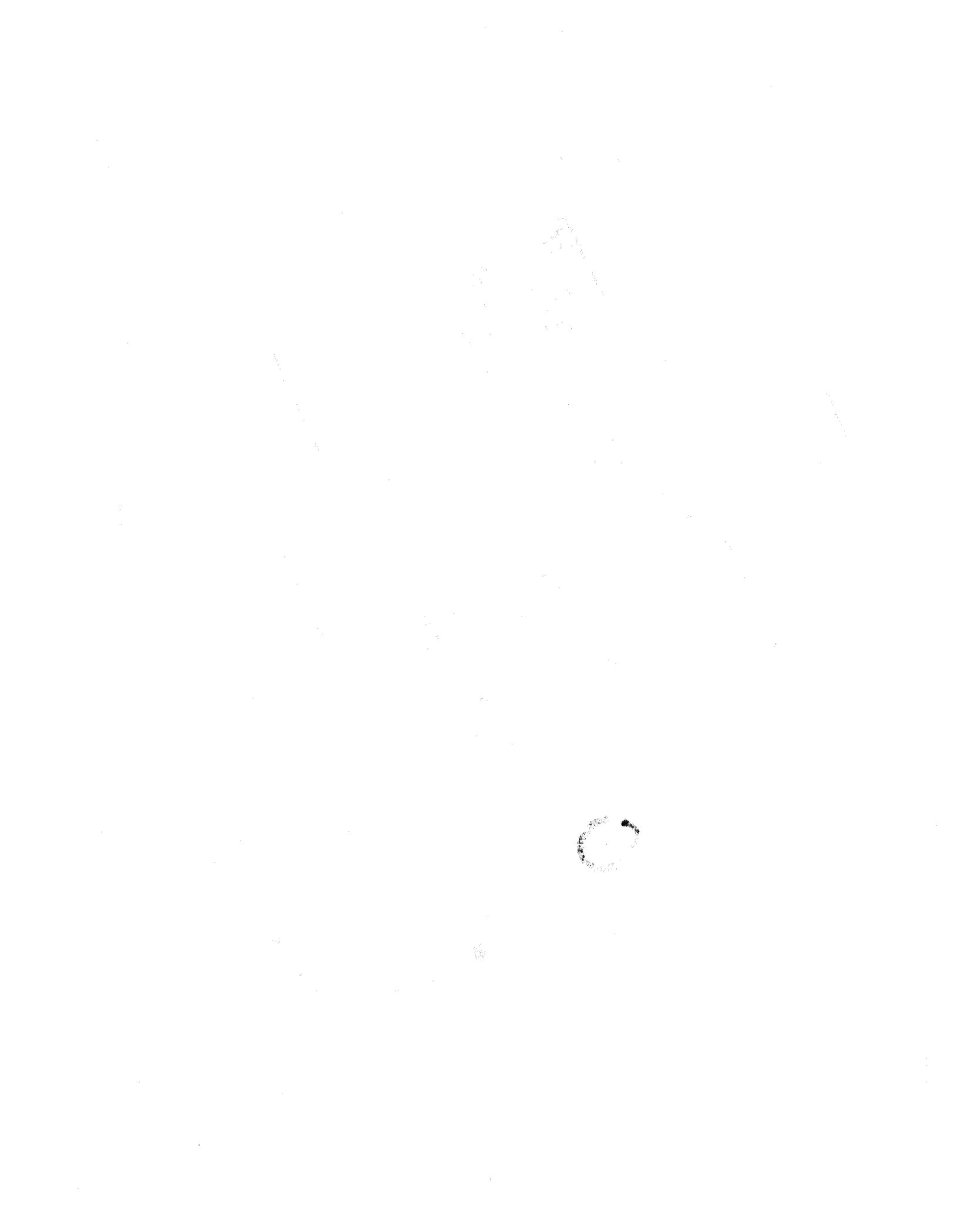
ORIGINAL PLAT OF CABLE (Not part of this plat)

DETAIL



Line by boundary agreement

BLOCK



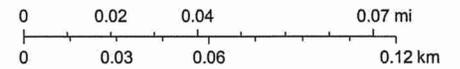
Bayfield County, WI



4/16/2021, 8:08:07 AM

- | | | | |
|--------------------|--------------------------------|----------------|--|
| Ashland Co Parcels | Approximate Parcel Boundary | State | Recorded Map |
| Douglas Co Parcels | Section Lines | County | Corner Tie Sheets |
| Rivers | Government Lot | Town | Section Corner Monument on File |
| Lakes | Municipal Boundary | CFR | Section Corner Monument Referenced on Survey |
| Tie Lines | Red Cliff Reservation Boundary | Private | Building Footprint 2009-2015 |
| Meander Lines | All Roads | Survey Maps | Changed |
| | Federal | UnRecorded Map | Demolished |

1:1,566



Bayfield County, Bayfield County Land Records

11-11-11

U.S.H. 63

OPEN SPACE

298'

OPEN SPACE

PARKING SPACE

27'

43'

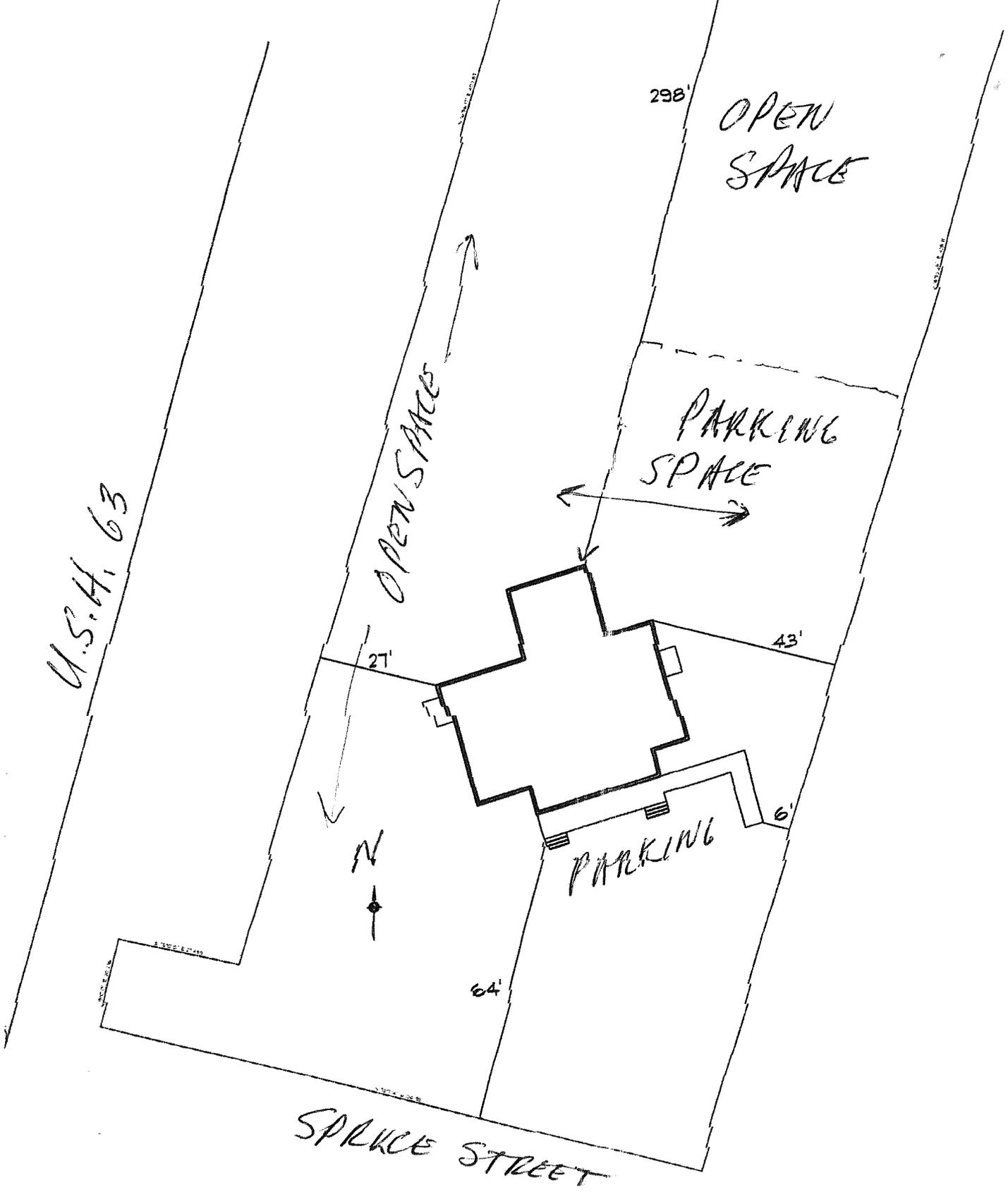
N

PARKING

6'

64'

SPRUCE STREET



Real Estate Bayfield County Property Listing

Today's Date: 4/26/2021

Property Status: Next Year

Created On: 4/9/2021 1:41:54 PM

Description Updated: 4/9/2021

Tax ID: 38469
PIN: 04-012-2-43-07-18-2 00-116-03140
 Legacy PIN:
 Map ID:
 Municipality: (012) TOWN OF CABLE
 STR: S18 T43N R07W
 Description: ASSESSOR'S PLAT NO 2 LOT 3 BLOCK 7
 LESS PAR DESC IN V.1033 & LESS PAR
 DESC IN DOC 2021R-587994
 Recorded Acres: 0.000
 Calculated Acres: 1.089
 Lottery Claims: 0
 First Dollar: No
 ESN: 108

Tax Districts Updated: 4/9/2021

1 STATE
 04 COUNTY
 012 TOWN OF CABLE
 041491 SCHL-DRUMMOND
 001700 TECHNICAL COLLEGE
 047110 CABLE SANITARY DISTRICT #1

Recorded Documents Updated: 4/8/2010

CORRECTION INSTRUMENT
 Date Recorded: 4/9/2021 2021R-587994
QUIT CLAIM DEED
 Date Recorded: 1/4/2010 2010R-530751 1033-1

Ownership Updated: 4/9/2021

ROBERT L & CORINNE E RASMUSSEN CABLE WI
TRUSTEES

Billing Address: **Mailing Address:**
ROBERT L & CORINNE E **ROBERT L & CORINNE E**
RASMUSSEN TRUSTEES **RASMUSSEN TRUSTEES**
 42890 LAKE RIDGE RD 42890 LAKE RIDGE RD
 CABLE WI 54821 CABLE WI 54821

Site Address * indicates Private Road
 13380 SPRUCE ST CABLE 54821

Property Assessment Updated: N/A

2021 Assessment Detail			
Code	Acres	Land	Imp.
N/A			
2-Year Comparison			
	2020	2021	Change
Land:	0	0	0.0%
Improved:	0	0	0.0%
Total:	0	0	0.0%

Property History

Parent Properties Tax ID
 04-012-2-43-07-18-2 00-116-03110 35800

HISTORY Expand All History White=Current Parcels Pink=Retired Parcels

Tax ID: 10046 **Pin:** 04-012-2-43-07-18-2 00-116-03000 **Leg. Pin:** 012116603990
Tax ID: 35800 **Pin:** 04-012-2-43-07-18-2 00-116-03110
 38469 This Parcel Parents Children

State Bar of Wisconsin Form 1-2003
WARRANTY DEED

Document Number

Document Name

PATRICIA A OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2009R-525401

03/09/2009 10:00AM

TF EXEMPT #: 16

RECORDING FEE: 13.00

PAGES: 2

THIS DEED, made between Robert L. Rasmussen and Corinne E. Rasmussen,
husband and wife

("Grantor," whether one or more), and Robert L. Rasmussen and Corinne E.
Rasmussen, as trustees of the Robert and Corinne Rasmussen Trust dated
December 30, 2008

("Grantee," whether one or more).

Grantor for a valuable consideration, conveys to Grantee the following described real
estate, together with the rents, profits, fixtures and other appurtenant interests, in
Bayfield County, State of Wisconsin ("Property") (if more space is
needed, please attach addendum):

See attached addendum.

Recording Area

Name and Return Address

Dana L. Tesch, Paralegal
Ruder Ware, L.L.S.C.
P.O. Box 8050
Wausau, WI 54402-8050

04-012-2-43-07-18-2 00-116-03000

Parcel Identification Number (PIN)

This is not homestead property.

(ix) (is not)

Grantor warrants that the title to the Property is good, indefeasible, in fee simple and free and clear of encumbrances except:
municipal and zoning ordinances and agreements entered under them, recorded easements, building and use restrictions and
covenants, and general taxes levied in 2009.

Dated January 31, 2009

Robert L. Rasmussen (SEAL)
* Robert L. Rasmussen

Corinne E. Rasmussen (SEAL)
* Corinne E. Rasmussen

(SEAL)
*

(SEAL)
*

AUTHENTICATION

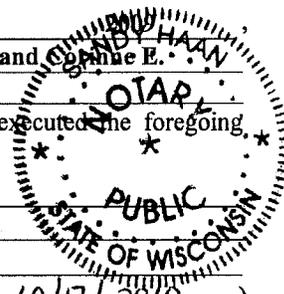
Signature(s) _____
authenticated on _____

ACKNOWLEDGMENT

STATE OF WISCONSIN)
) ss.
Bayfield COUNTY)

Personally came before me on January
the above-named Robert L. Rasmussen and Corinne E. Rasmussen
to me known to be the person(s) who executed the foregoing
instrument and acknowledged the same.

Sandy Haan
* Sandy Haan
Notary Public, State of WISCONSIN
My commission (is permanent) (expires: 10/17/2010)



V1012 P277

TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, _____
authorized by Wis. Stat. § 706.06)

THIS INSTRUMENT DRAFTED BY:
Mark J. Bradley
Ruder Ware, L.L.S.C., Wausau, WI

(Signatures may be authenticated or acknowledged. Both are not necessary.)

NOTE: THIS IS A STANDARD FORM. ANY MODIFICATION TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.

WARRANTY DEED

©2003 STATE BAR OF WISCONSIN

FORM NO. 1-2003

*Type name below signatures.

INFO-PRO™ Legal Forms • (800)655-2021 • infoforms.com

A parcel of land (being a part of the abandoned Chicago, Northwestern Transportation Company right-of-way.) located in the Southeast Quarter of the Northwest Quarter (SE 1/4 NW 1/4) of Section Eighteen (18), Township Forty-three (43), Range 7 West, in the Village of Cable, Bayfield County, Wisconsin, more particularly described as follows:

To find the beginning point, begin at the iron pipe at the Southeast corner of Lot 3, Block 8, Assessor's Plat No. 2, Village of Cable, continuing a Westerly extension from said pipe along the lot line to the Easterly boundary of said abandoned right-of-way, this being the point of beginning;

Thence Northwesterly across Railroad right-of-way to an iron pipe in the Northwest corner of Lot 4, Block 7, Assessor's Plat. No. 2, Village of Cable, Bayfield County;

Thence Northwesterly 475 feet, more or less, to an iron pipe at the Northeasterly corner of Lot 3, Block 7;

Thence on the Easterly extension of the North line of Lot 3, 100 feet to a point on the Easterly boundary of said right-of-way;

Thence Southwesterly along said abandoned right-of-way on the Easterly boundary, to the point of beginning.

Also, all of Lot 3, Block 7, Assessor's Plat No. 2, Village of Cable.

Subject to Easement: Non-exclusive easement for driveway purposes reserved by Chicago, Saint Paul, Minnesota and Omaha Railway Company in a deed to Ed's Service Center, Inc. dated November 10, 1964, and recorded in the office of the Register of Deeds for Bayfield County, Wisconsin, on December 18, 1964, in Volume 202 of Records on page 599, as Document No. 243732.

V1012 P278,

State Bar of Wisconsin Form 3 - 2003
QUIT CLAIM DEED

Document Number

Document Name

PATRICIA A OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2010R-530751

01/04/2010 10:00AM

TF EXEMPT #: 155

RECORDING FEE: 11.00

PAGES: 1

THIS DEED, made between Robert L. Rasmussen and Corinne E. Rasmussen, husband and wife

("Grantor," whether one or more),

and Rasmussen-Arthur LLC, a Wisconsin Limited Liability Company

("Grantee," whether one or more).

Grantor, quit claims to Grantee the following described real estate, together with the rents, profits, fixtures and other appurtenant interests, in Bayfield County, State of Wisconsin ("Property") (if more space is needed, please attach addendum):

A parcel of land (being part of the abandoned Chicago, Northwestern Transportation Company right-of-way) located in the Southeast Quarter of the Northwest Quarter (SE1/4-NW1/4) of Section Eighteen (18), Township Forty-three (43) North Range Seven (7) West, Village (now Township) of Cable, Bayfield County, Wisconsin, more particularly described as follows:

Beginning at a iron pipe at the Northeast Corner of Lot 3, Block 7, Assessor's Plat No. 2, Village of Cable; thence Southeasterly along the extension of the Northerly line of said Lot 3, 100 feet to the Easterly boundary of said abandoned railroad R/W, thence Southwesterly along said R/W, 40.00 feet; thence Northwesterly 100 feet to the Westerly line of said R/W; thence Northeasterly along said R/W 40.00 feet to the point of beginning. Subject to all easements and reservations of record. Contains 4000 square feet (0.09 acres, more or less)

Dated 12/31/09

Robert L. Rasmussen (SEAL)

* Robert L. Rasmussen

Recording Area

Name and Return Address

ROBERT RASMUSSEN
42890 LAKE RIDGE RD
CABLE, WI 54821

04-012-2-43-07-18-2 00-116-04050(part)

Parcel Identification Number (PIN)

This is not homestead property.

(is) (is not)

Corinne E. Rasmussen (SEAL)

* Corinne E. Rasmussen

(SEAL)

(SEAL)

AUTHENTICATION

Signature(s) _____

authenticated on _____

V1033 P 1

TITLE: MEMBER STATE BAR OF WISCONSIN

(If not, _____
authorized by Wis. Stat. § 706.06)

THIS INSTRUMENT DRAFTED BY:

Robert L. Rasmussen
42890 Lake Ridge Rd, Cable, WI 54821

ACKNOWLEDGMENT

STATE OF WISCONSIN)
) ss.
Bayfield COUNTY)

Personally came before me on _____,
the above-named Robert L. Rasmussen and
Corinne E. Rasmussen

to me known to be the person(s) who executed the
foregoing instrument and acknowledged the same.

William B. McKinley
* William B. McKinley

Notary Public, State of Wisconsin
My Commission (is permanent) (expires: 10-20-13)

(Signatures may be authenticated or acknowledged. Both are not necessary.)

NOTE: THIS IS A STANDARD FORM. ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.
QUIT CLAIM DEED STATE BAR OF WISCONSIN FORM No. 3-2003

*Type name below signatures.



* 2 0 2 1 R - 5 8 7 9 9 4 3 3 *

State Bar of Wisconsin Form 00-2011
CORRECTION INSTRUMENT

Under Wis. Stat. § 706.085

Document Number

Document Name

2021R-587994

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
04/08/2021 02:32PM
TF EXEMPT #: 3
RECORDING FEE: 30.00
PAGES: 33

Undersigned hereby states that a certain document ("conveyance") titled as Correction Instrument (type of document), and executed between Robert L. Rasmussen, Corinne*, Grantor, and Cable Lumber and Home, Inc.**, Grantee, was recorded in Bayfield County, Wisconsin, on April 5, 2021, in volume _____, page _____, as document number ***, and contained the following error:

*Corinne E. Rasmussen, Robert P. Rasmussen and Lisa K. Arthur
**Inc., a Wisconsin Corporation
***2021R-587901
Error: Incorrect Legal Description

Undersigned makes this Correction Instrument for the purpose of correcting the conveyance as follows:

Amend Legal Description
PINS:
04-012-2-43-07-18-2 00-116-03110
04-012-2-43-07-18-2 00-116-04050

Recording Area

Name and Return Address
Spears, Carlson & Coleman
122 W. Bayfield St
PO Box 547
Washburn, WI 54891

The basis for Undersigned's personal knowledge is (check one):

- Undersigned is the Grantor/Grantee of the property described in the conveyance.
- Undersigned is the drafter of the conveyance that is the subject of the Correction Instrument
- Undersigned is the settlement agent in the transaction that is the subject of this Correction Instrument
- Other (Explain):

SEE PINS AT LEFT
Parcel Identification Number (PIN)

A copy of the conveyance (in part or whole) is is not attached to this Correction Instrument (if a copy of the conveyance is not attached, attach the legal description).
Undersigned has sent notice of the execution and recording of this Correction Instrument by 1st class mail to all parties to the transaction that was the subject of the conveyance at their last known addresses.

Dated April 7, 2021

(SEAL)

AUTHENTICATION

Signature of _____
authenticated on _____

* _____
TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, _____
authorized by Wis. Stat. §706.06)

THIS INSTRUMENT DRAFTED BY:
Atty. April K. Splittgerber, SBN 1117654
Spears, Carlson & Coleman, S.C.

ACKNOWLEDGMENT

STATE OF WISCONSIN)
) ss
_____ COUNTY)

Personally came before me on _____,
the above-named _____
to me known to be the person who executed the foregoing
instrument and acknowledged the same.

* _____
Notary Public, State of Wisconsin
My Commission (is permanent) (expires: _____)

(Signatures may be authenticated or acknowledged. Both are not necessary.)

NOTE: THIS IS A STANDARD FORM. ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.

CORRECTION INSTRUMENT

STATE BAR OF WISCONSIN

FORM NO. 00-2011

* Type name below signatures.

Bayfield County Register of Deeds

Document # 2021R-587994

Page 1 of 33

Exhibit A

Attachment A

A parcel of land (being a part of the former Chicago and North Western Transportation Company railroad right-of-way) located in the Southeast Quarter of the Northwest Quarter (SE¼ - NW¼) of Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, situated in the Village of Cable, Bayfield County, State of Wisconsin, more particularly described as follows:

Beginning at a point lying 59.72 feet N 16°52'46" E of the SW corner of Lot Three (3) of Block Eight (8) of Assessor's Plat No. 2, Village of Cable, located on the Easterly boundary of the former railroad right-of-way;

Thence Northwesterly across the former railroad right-of-way a distance of 100 feet to an iron pipe marking the NE corner of Lot Four (4) of Block Seven (7) of Assessor's Plat No. 2, Village of Cable, Bayfield County;

Thence Northeasterly along the East line of Lot Three (3) of Block Seven (7) of Assessor's Plat No. 2, Village of Cable, being the Westerly boundary of the former railroad right-of-way, 385.11 feet to an iron pipe being 40 feet South Westerly of the Northeasterly corner of Lot Three (3) of Block Seven (7) of Assessor's Plat No. 2:

Thence Southeasterly a distance of 100 feet to a point on the Easterly boundary of the former railroad right-of-way,

Thence Southwesterly along the Easterly boundary of the former railroad right-of-way a distance of 385.11 feet, more or less, to the Point of Beginning.

AND

Lots One (1), Two (2) and Three (3), recorded in Certified Survey Map 581, Volume 4, Pages 174-175, Document No. 368130, being located in Assessor's Plat No. 2, Section Eighteen (18), Township Forty-Three (43) North, Range Seven (7) West, in the Town of Cable, Bayfield County, State of Wisconsin.

Less the following:

Parcel "A" as described on the Plat of Survey attached hereto (2 pages) having a legal description as follows: A parcel of land located in part of Lot Three (3), Block Eight (8), Assessor's Plat No. 2 and part of the adjacent Chicago and Northwestern R.R./W being part of the Southeast Quarter of the Northwest Quarter (SE¼ - NW¼), Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, Town of Cable, Bayfield County, Wisconsin, described as follows: Beginning at the SW corner of said Lot 3; thence N 77°42'24" W, 8.58 feet; thence N 12°28'42" E, 68.15 feet to the North line of a 20 foot roadway easement; thence S 73°12'44" E along said North line, 163.78 feet to the Westerly line of First Avenue North; thence S 16°52'46" W along said Westerly line, 40.00 feet; thence N. 73°12'44" W, 64.96 feet; thence S 16°52'46" W, 20.60 feet; thence N 77°42'24" W, 85.31 feet to the point of beginning. Subject to the

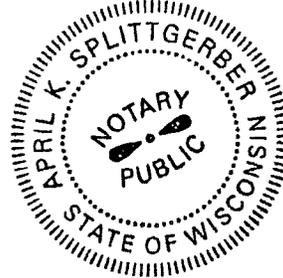
Northerly 20 feet thereof being used for roadway purposes and all other easements and reservations of record. The above parcel contains 8792 square feet or 0.20 acres of land, more or less. Cable Lumber & Home, Inc. joins in the execution of this deed solely for the purpose of terminating any leasehold interest that it may have in the parcel conveyed herein.

Robert L. Rasmussen
(SEAL)

Robert L. Rasmussen

ACKNOWLEDGMENT

STATE OF WISCONSIN
COUNTY OF Bayfield)ss.



Personally came before me this 7 day of
April, 2021, the above named
Robert L. Rasmussen to me known to be the person
who executed the foregoing instrument and acknowledges the same.

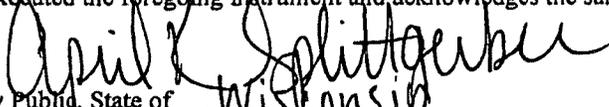
April K. Splittgerber
Notary Public, State of WI
My commission (is permanent)(expires): _____

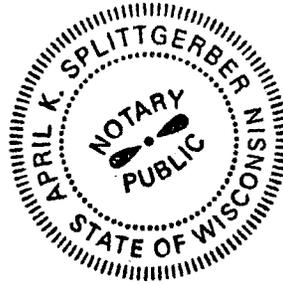
 (SEAL)
Robert P. Rasmussen

ACKNOWLEDGMENT

STATE OF Wisconsin
COUNTY OF Bayfield)ss.

Personally came before me this 7 day of
April, 2021, the above named
Robert P. Rasmussen to me known to be the person
who executed the foregoing instrument and acknowledges the same.


Notary Public, State of Wisconsin
My commission (is permanent)(~~expires~~): _____



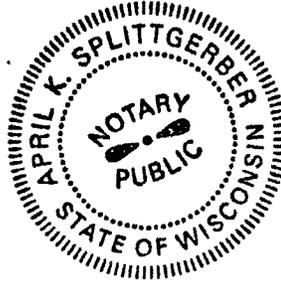
Lisa K Arthur (SEAL)
Lisa K. Arthur

ACKNOWLEDGMENT

STATE OF WISCONSIN)
COUNTY OF Bayfield)ss.

Personally came before me this 7 day of
April, 2021, the above named
Lisa K. Arthur to me known to be the person
who executed the foregoing instrument and acknowledges the same.

April K Splitzgerber
Notary Public, State of WI
My commission (is permanent)(expires): _____



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 4/7/21 Robert L. Rasmussen
Robert L. Rasmussen, member of Cable Lumber and Home, Inc.

Dated: 4/7/2021 Corinne E. Rasmussen
Corinne E. Rasmussen, member of Cable Lumber and Home, Inc.

Dated: 4/7/21 Robert P. Rasmussen
Robert P. Rasmussen, member of Cable Lumber and Home, Inc.

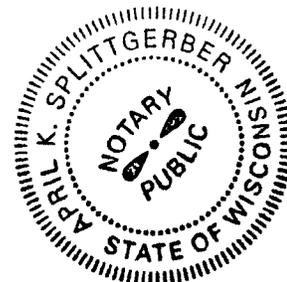
Dated: 4/7/21 Lisa K. Arthur
Lisa K. Arthur, member of Cable Lumber and Home, Inc.

ACKNOWLEDGMENT

STATE OF WISCONSIN)
)ss.
COUNTY OF Bayfield)

Personally, came before me this 7 day of April, 2021, the above-named Robert L. Rasmussen, Corinne E. Rasmussen, Robert P. Rasmussen, and Lisa K. Arthur, members of Cable Lumber and Home, Inc., to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires permanent



State Bar of Wisconsin Form 00-2011
CORRECTION INSTRUMENT

Under Wis. Stat. § 706.085

Document Number

Document Name

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2021R-587901

04/05/2021 11:01AM

TF EXEMPT #: 3

RECORDING FEE: \$30.00

PAGES: 25

Undersigned hereby states that a certain document ("conveyance") titled as Correction Instrument (type of document), and executed between Robert L. Rasmussen, Corinne*, Grantor, and Cable Lumber and Home, Inc.**, Grantee, was recorded in Bayfield County, Wisconsin, on March 16, 2021, in volume _____, page _____, as document number ***, and contained the following error:

*Corinne E. Rasmussen, Robert P. Rasmussen and Lisa K. Arthur

**Inc., a Wisconsin Corporation

***2021R-587579

Error: Incorrect legal description

Undersigned makes this Correction Instrument for the purpose of correcting the conveyance as follows:

Amend Legal Description

PINS:

04-012-2-43-07-18-2 00-116-03110

04-012-2-43-07-18-2 00-116-04050

Recording Area

Name and Return Address

Spears, Carlson & Coleman

122 W. Bayfield St.

PO Box 547

Washburn, WI 54891

The basis for Undersigned's personal knowledge is (check one):

Undersigned is the Grantor/Grantee of the property described in the conveyance.

Undersigned is the drafter of the conveyance that is the subject of the Correction Instrument

Undersigned is the settlement agent in the transaction that is the subject of this Correction Instrument

Other (Explain):

SEE PINS AT LEFT

Parcel Identification Number (PIN)

A copy of the conveyance (in part or whole) is is not attached to this Correction Instrument (if a copy of the conveyance is not attached, attach the legal description).

Undersigned has sent notice of the execution and recording of this Correction Instrument by 1st class mail to all parties to the transaction that was the subject of the conveyance at their last known addresses.

Dated April 1, 2021

*SEE ATTACHED (SEAL)

AUTHENTICATION

Signature of _____

authenticated on _____

ACKNOWLEDGMENT

STATE OF WISCONSIN)
) ss
_____ COUNTY)

Personally came before me on _____,
the above-named _____
to me known to be the person who executed the foregoing
instrument and acknowledged the same.

*

Notary Public, State of Wisconsin
My Commission (is permanent) (expires: _____)

*
TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, _____
authorized by Wis. Stat. §706.06)

THIS INSTRUMENT DRAFTED BY:
Atty. April K. Splittgerber, SBN 1117654
Spears, Carlson & Coleman, S.C.

(Signatures may be authenticated or acknowledged. Both are not necessary.)

NOTE: THIS IS A STANDARD FORM. ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.

CORRECTION INSTRUMENT

STATE BAR OF WISCONSIN

FORM NO. 00-2011

* Type name below signatures.

Exhibit A

Attachment A

A parcel of land (being a part of the former Chicago and North Western Transportation Company railroad right-of-way) located in the Southeast Quarter of the Northwest Quarter (SE ¼ - NW ¼) of Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, situated in the Village of Cable, Bayfield County, State of Wisconsin, more particularly described as follows:

Beginning at a point lying 59.72 feet N 16°52'46" E of the SW corner of Lot Three (3) of Block Eight (8) of Assessor's Plat No. 2, Village of Cable, located on the Easterly boundary of the former railroad right-of-way;

Thence Northwesterly across the former railroad right-of-way a distance of 100 feet to an iron pipe marking the NW corner of Lot Four (4) of Block Seven (7) of Assessor's Plat No. 2, Village of Cable, Bayfield County;

Thence Northwesterly along the East line of Lot Three (3) of Block Seven (7) of Assessor's Plat No. 2, Village of Cable, being the Westerly boundary of the former railroad right-of-way, 385.11 feet to an iron pipe being 40 feet South Westerly of the Northeasterly corner of Lot Three (3) of Block Seven (7) of Assessor's Plat No. 2:

Thence Southeasterly a distance of 100 feet to a point on the Easterly boundary of the former railroad right-of-way,

Thence Southwesterly along the Easterly boundary of the former railroad right-of-way a distance of 385.11 feet, more or less, to the Point of Beginning.

AND

Lots One (1), Two (2) and Three (3), recorded in Certified Survey Map 581, Volume 4, Pages 174-175, Document No. 368130, being located in Assessor's Plat No. 2, Section Eighteen (18), Township Forty-Three (43) North, Range Seven (7) West, in the Town of Cable, Bayfield County, State of Wisconsin.

Less the following:

Parcel "A" as described on the Plat of Survey attached hereto (2 pages) having a legal description as follows: A parcel of land located in part of Lot Three (3), Block Eight (8), Assessor's Plat No. 2 and part of the adjacent Chicago and Northwestern R.R./W being part of the Southeast Quarter of the Northwest Quarter (SE ¼ - NW ¼), Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, Town of Cable, Bayfield County, Wisconsin, described as follows: Beginning at the SW corner of said Lot 3; thence N 77°42'24" W, 8.58 feet; thence N 12°28'42" E, 68.15 feet to the North line of a 20 foot roadway easement; thence S 73°12'44" E along said North line, 163.78 feet to the Westerly line of First Avenue North; thence S 16°52'46" W along said Westerly line, 40.00 feet; thence N. 73°12'44" W, 64.96 feet; thence S 16°52'46" W, 20.60 feet; thence N 77°42'24" W, 85.31 feet to the point of

beginning. Subject to the Northerly 20 feet thereof being used for roadway purposes and all other easements and reservations of record. The above parcel contains 8792 square feet or 0.20 acres of land, more or less. Cable Lumber & Home, Inc. joins in the execution of this deed solely for the purpose of terminating any leasehold interest that it may have in the parcel conveyed herein.

SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 04/01/21

Robert L. Rasmussen
Robert L. Rasmussen

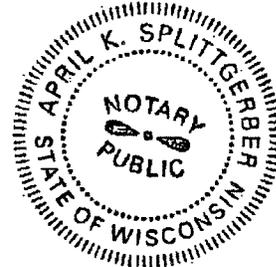
ACKNOWLEDGMENT

STATE OF WISCONSIN)

COUNTY OF Bayfield)^{ss.}

Personally, came before me this 1st day of April, 2021, the above-named Robert L. Rasmussen, to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires: perm



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 04/01/21

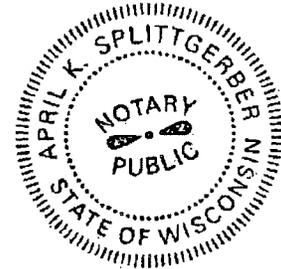
Corinne E. Rasmussen
Corinne E. Rasmussen

ACKNOWLEDGMENT

STATE OF WISCONSIN)
)ss.
COUNTY OF Bayfield)

Personally, came before me this 1st day of April, 2021, the above-named Corinne E. Rasmussen, to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires perm



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 04/01/21

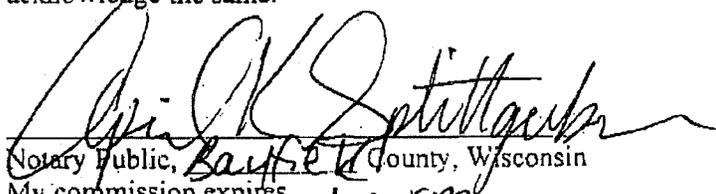


Robert P. Rasmussen

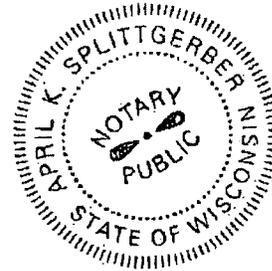
ACKNOWLEDGMENT

STATE OF WISCONSIN)
COUNTY OF Bayfield)^{ss.}

Personally, came before me this 1st day of April, 2021, the above-named Robert P. Rasmussen, to me known to be the person who executed the foregoing instrument and acknowledge the same.



Notary Public, Bayfield County, Wisconsin
My commission expires perm



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 04/01/21

Lisa K Arthur
Lisa K. Arthur

ACKNOWLEDGMENT

STATE OF WISCONSIN)
COUNTY OF Bayfield)ss.

Personally, came before me this 1st day of April 2021, the above-named Lisa K. Arthur, to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires per m

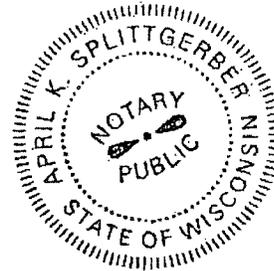


Exhibit A

Lots One (1), Two (2) and Three (3), recorded in Certified Survey Map 581, Volume 4, Pages 174-175, Document No. 368130, being located in Assessor's Plat No. 2, Section Eighteen (18), Township Forty-Three (43) North, Range Seven (7) West, in the Town of Cable, Bayfield County, State of Wisconsin.

Less the following:

Parcel "A" as described on the Plat of Survey attached hereto (2 pages) having a legal description as follows: A parcel of land located in part of Lot Three (3), Block Eight (8), Assessor's Plat No. 2 and part of the adjacent Chicago and Northwestern R.R./W being part of the Southeast Quarter of the Northwest Quarter (SE ¼ - NW ¼), Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, Town of Cable, Bayfield County, Wisconsin, described as follows: Beginning at the SW corner of said Lot 3; thence N 77°42'24" W, 8.58 feet; thence N 12°28'42" E, 68.15 feet to the North line of a 20 foot roadway easement; thence S 73°12'44" E along said North line, 163.78 feet to the Westerly line of First Avenue North; thence S 16°52'46" W along said Westerly line, 40.00 feet; thence N. 73°12'44" W, 64.96 feet; thence S 16°52'46" W, 20.60 feet; thence N 77°42'24" W, 85.31 feet to the point of beginning. Subject to the Northerly 20 feet thereof being used for roadway purposes and all other easements and reservations of record. The above parcel contains 8792 square feet or 0.20 acres of land, more or less. Cable Lumber & Home, Inc. joins in the execution of this deed solely for the purpose of terminating any leasehold interest that it may have in the parcel conveyed herein.

AND

Attachment A

A parcel of land (being a part of the former Chicago and North Western Transportation Company railroad right-of-way) located in the Southeast Quarter of the Northwest Quarter (SE ¼ - NW ¼) of Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, situated in the Village of Cable, Bayfield County, State of Wisconsin, more particularly described as follows:

Beginning at a point lying 59.72 feet N 16°52'46" E of the SW corner of Lot Three (3) of Block Eight (8) of Assessor's Plat No. 2, Village of Cable, located on the Easterly boundary of the former railroad right-of-way;

Thence Northwesterly across the former railroad right-of-way a distance of 100 feet to an iron pipe marking the NW corner of Lot Four (4) of Block Seven (7) of Assessor's Plat No. 2, Village of Cable, Bayfield County;

Thence Northwesterly along the East line of Lot Three (3) of Block Seven (7) of Assessor's Plat No. 2, Village of Cable, being the Westerly boundary of the former railroad right-of-way, 385.11 feet to an iron pipe being 40 feet South Westerly of the Northeasterly corner of Lot Three (3) of Block Seven (7) of Assessor's Plat No. 2:

Thence S16°52'46" E a distance of 100 feet to a point on the Easterly boundary of the former railroad right-of-way,

Thence Southwesterly along the Easterly boundary of the former railroad right-of-way a distance of 385.11 feet, more or less, to the Point of Beginning.

SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 03/15/2021

Robert L. Rasmussen
Robert L. Rasmussen

Dated: 03/15/2021

Corinne E. Rasmussen
Corinne E. Rasmussen

Dated: 03/15/2021

Robert P. Rasmussen
Robert P. Rasmussen

Dated: 03/15/2021

Lisa K. Arthur
Lisa K. Arthur

ACKNOWLEDGMENT

STATE OF WISCONSIN)
)ss.
COUNTY OF Bayfield)

Personally, came before me this 15 day of March 2021, the above-named Robert L. Rasmussen, Corinne E. Rasmussen, Robert P. Rasmussen, and Lisa K. Arthur, members of Cable Home & Lumber, Inc., to me known to be the person who executed the foregoing instrument and acknowledge thep same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission is permanent.



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 03/15/2021

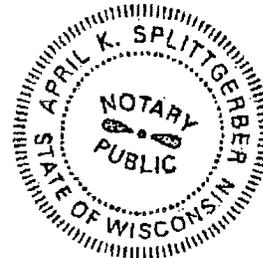
Robert L. Rasmussen
Robert L. Rasmussen

ACKNOWLEDGMENT

STATE OF WISCONSIN)
COUNTY OF Bayfield)^{ss.}

Personally, came before me this 15 day of March 2021, the above-named Robert L. Rasmussen, to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires perm



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 03/15/2021

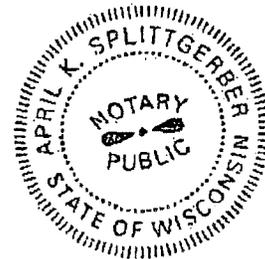
Corinne E. Rasmussen
Corinne E. Rasmussen

ACKNOWLEDGMENT

STATE OF WISCONSIN)
)ss.
COUNTY OF Bayfield)

Personally, came before me this 15 day of March 2021, the above-named Corinne E. Rasmussen, to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires perm



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 03/15/2021

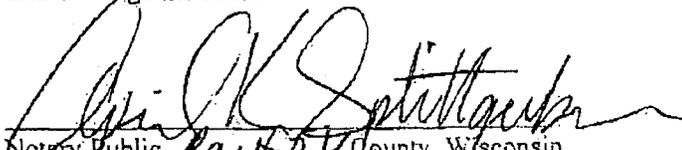


Robert P. Rasmussen

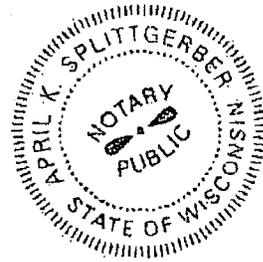
ACKNOWLEDGMENT

STATE OF WISCONSIN)
)ss.
COUNTY OF Bayfield)

Personally, came before me this 15 day of March 2021, the above-named Robert P. Rasmussen, to me known to be the person who executed the foregoing instrument and acknowledge the same.



Notary Public, Bayfield County, Wisconsin
My commission expires per m



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 03/15/2021

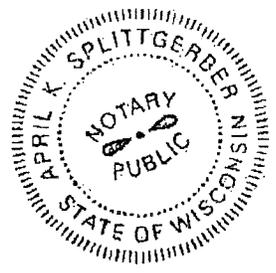
Lisa K Arthur
Lisa K. Arthur

ACKNOWLEDGMENT

STATE OF WISCONSIN)
COUNTY OF Bayfield)ss.

Personally, came before me this 15 day of March 2021, the above-named Lisa K. Arthur, to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires per m



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

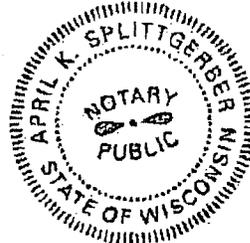
Dated: 3/1/21 Robert L. Rasmussen
Robert L. Rasmussen

ACKNOWLEDGMENT

STATE OF WISCONSIN)
)ss.
COUNTY OF Bayfield)

Personally, came before me this 1 day of March 2021, the above-named Robert L. Rasmussen, to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K. Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires is perm.



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 3/1/21

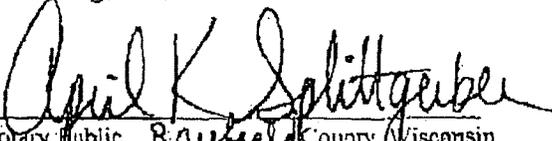


Robert P. Rasmussen

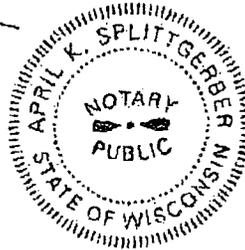
ACKNOWLEDGMENT

STATE OF WISCONSIN)
)ss.
COUNTY OF Bayfield)

Personally, came before me this 1 day of March 2021, the above-named Robert P. Rasmussen, to me known to be the person who executed the foregoing instrument and acknowledge the same.



Notary Public, Bayfield County, Wisconsin
My commission expires is perm.



SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 3/1/21 Lisa K Arthur
Lisa K. Arthur

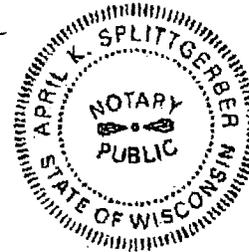
ACKNOWLEDGMENT

STATE OF WISCONSIN)

COUNTY OF Bayfield^{SS.}

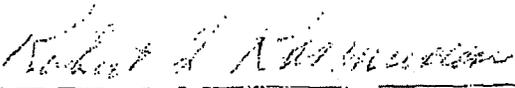
Personally, came before me this 1 day of March 2021, the above-named Lisa K. Arthur, to me known to be the person who executed the foregoing instrument and acknowledge the same.

April K Splittgerber
Notary Public, Bayfield County, Wisconsin
My commission expires 15 years



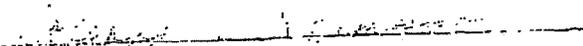
SIGNATURE AND NOTARY ADDENDUM TO CORRECTION INSTRUMENT

Dated: 03/02/2021



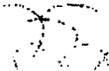
Robert L. Rasmussen, member, Cable Lumber and Home, Inc.

Dated: 03/02/2021



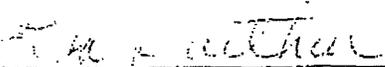
Corinne E. Rasmussen, member, Cable Lumber and Home, Inc.

Dated: 03/02/2021



Robert P. Rasmussen, member, Cable Lumber and Home, Inc.

Dated: 03/02/2021

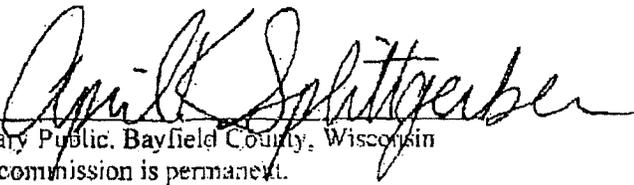


Lisa K. Arthur, member, Cable Lumber and Home, Inc.

ACKNOWLEDGMENT

STATE OF WISCONSIN)
)ss.
COUNTY OF BAYFIELD)

Personally, came before me this 2 day of March, 2021 the above-named Robert L. Rasmussen, Corinne E. Rasmussen, Robert P. Rasmussen and Lisa K. Arthur, to me known to be the person who executed the foregoing instrument and acknowledge the same.



Notary Public, Bayfield County, Wisconsin
My commission is permanent.



State Bar of Wisconsin Form 3-2003
QUIT CLAIM DEED

Document Number

Document Name

THIS DEED, made between Robert L. Rasmussen, Corinne E. Rasmussen, Robert P. Rasmussen and Lisa K. Arthur

("Grantor," whether one or more), and Cable Lumber & Home, Inc., a Wisconsin Corporation

("Grantee," whether one or more).
Grantor quit claims to Grantee the following described real estate, together with the rents, profits, fixtures and other appurtenant interests, in Bayfield County, State of Wisconsin ("Property") (if more space is needed, please attach addendum):
See attached.

DENISE TARASEWICZ
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2020R-585058

10/26/2020 01:18PM
TF EXEMPT #: 158
RECORDING FEE: \$30.00

PAGES: 3

Recording Area

Name and Return Address
Spears, Carlson & Coleman, S.C.
PO Box 547
Washburn, WI 54891

04-012-2-43-07-18-2 00-116-04050

Parcel Identification Number (PIN)

This is not homestead property.
(~~is~~) (is not)

Dated 10/15/20

[Signature]
* Robert P. Rasmussen

[Signature]
* Lisa K. Arthur

(SEAL)

[Signature]
* Robert L. Rasmussen

[Signature]
* Corinne E. Rasmussen

(SEAL)

(SEAL)

AUTHENTICATION

Signature(s) _____

authenticated on _____

*

TITLE: MEMBER STATE BAR OF WISCONSIN

(If not, _____
authorized by Wis. Stat. § 706.06)

THIS INSTRUMENT DRAFTED BY:
Atty. April K. Splittgerber, SBN 1117654
PO Box 547, Washburn, WI 54891

ACKNOWLEDGMENT

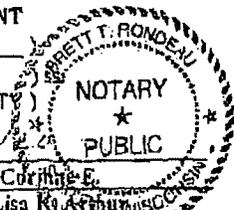
STATE OF WISCONSIN

BAYFIELD COUNTY)

Personally came before me on 10/15/20
the above-named Robert L. Rasmussen, Corinne E. Rasmussen, Robert P. Rasmussen and Lisa K. Arthur
to me known to be the person(s) who executed the foregoing instrument and acknowledged the same.

[Signature]
* [Signature]
Notary Public, State of Wisconsin

My commission (is permanent) (expires: 2/2/2022)



(Signatures may be authenticated or acknowledged. Both are not necessary.)

NOTE: THIS IS A STANDARD FORM. ANY MODIFICATION TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.
QUIT CLAIM DEED ©2003 STATE BAR OF WISCONSIN FORM NO. 3-2003

*Type name below signatures.

INFO-PRO™ Legal Forms • (800)855-2021 • info@proforma.com

Exhibit A

Lots One (1), Two (2) and Three (3), recorded in Certified Survey Map 581, Volume 4, Pages 174-175, Document No. 368130, being located in Assessor's Plat No. 2, Section Eighteen (18), Township Forty-Three (43) North, Range Seven (7) West, in the Town of Cable, Bayfield County, State of Wisconsin.

Less the following:

Parcel "A" as described on the Plat of Survey attached hereto (2 pages) having a legal description as follows: A parcel of land located in part of Lot Three (3), Block Eight (8), Assessor's Plat No. 2 and part of the adjacent Chicago and Northwestern R.R./W being part of the Southeast Quarter of the Northwest Quarter (SE ¼ - NW ¼), Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, Town of Cable, Bayfield County, Wisconsin, described as follows: Beginning at the SW corner of said Lot 3; thence N 77°42'24" W, 8.58 feet; thence N 12°28'42" E, 68.15 feet to the North line of a 20 foot roadway easement; thence S 73°12'44" E along said North line, 163.78 feet to the Westerly line of First Avenue North; thence S 16°52'46" W along said Westerly line, 40.00 feet; thence N. 73°12'44" W, 64.96 feet; thence S 16°52'46" W, 20.60 feet; thence N 77°42'24" W, 85.31 feet to the point of beginning. Subject to the Northerly 20 feet thereof being used for roadway purposes and all other easements and reservations of record. The above parcel contains 8792 square feet or 0.20 acres of land, more or less. Cable Lumber & Home, Inc. joins in the execution of this deed solely for the purpose of terminating any leasehold interest that it may have in the parcel conveyed herein.

AND

Description – Parcel "A"

A parcel of land located in part of Lot 3, Block 8, Assessor's Plat No. 2 and part of the adjacent Chicago and Northwestern R.R./W, being part of the SE ¼ - NW ¼, sec. 18-T43N-R7W, Town of Cable, Bayfield County, Wisconsin, described as follows:

Beginning at the SW corner of said Lot 3; thence North 77 degrees, 42 minutes, 24 seconds West, 8.58 feet; thence North 12 degrees, 28 minutes, 42 seconds East, 68.15 feet to the North line of a 20 foot roadway easement; thence South 73 degrees, 12 minutes, 44 seconds East along said North line, 163.78 feet to the Westerly line of First Avenue North; thence South 16 degrees, 52 minutes, 46 seconds West along said Westerly line, 40.0 feet; thence North 73 degrees, 12 minutes, 44 seconds West, 64.96 feet; thence South 16 degrees, 52 minutes, 48 seconds West, 20.60 feet; thence North 77 degrees, 42 minutes, 24 seconds West, 85.31 feet to the point of beginning. Subject to the Northerly 20 feet thereof being used for roadway purposes and all other easements and reservations of record. The above parcel contains 8792. square feet or 0.20 acres of land, more or less.

Description – Parcel "B"

A parcel of land located in Lot 4, Block 8, Assessor's Plat No. 2, being part of the SE ¼ -NW ¼, Sec. 18-T43N-R7W, Town of Cable, Bayfield County, Wisconsin, described as follows:

Commencing at the SW corner of said Lot 3; thence South 77 degrees, 42 minutes, 24 seconds East, 85.31 feet to the point of beginning; thence North 16 degrees, 52 minutes, 46 seconds East, 20.60 feet; thence South 73 degrees, 12 minutes, 44 seconds East, 64.96 feet to the Westerly line of First Avenue North; thence South 16 degrees, 52 minutes, 46 seconds West along said Westerly line, 15.49 feet; thence North 77 degrees, 42 minutes, 24 seconds West, 65.17 feet to the point of beginning. Subject to all easements and reservations of record. The above parcel contains 1172. Square feet or 0.03 acres of land, more or less.

CHECKLIST

- 1) REZONE HAS BEEN DATE STAMPED (Clerk's Office should make a copy of packet)
- 2) Application is DATE STAMPED
- 3) Land Use is DATE STAMPED
- 4) Copy of Recorded Deed is attached. All pages are needed
- 5) Is there more than 1 Deed to the property? If Yes-all deeds need to be attached
- 6) Application is filled out in Deed Holders Name?
- 7) Copy of Tax Statement is attached (Does Name(s) Match Application?)
- 8) Tax Statement matches Ownership on Deed and Application
- 9) Pink Form for Town Recommendation is attached
- 10) Legal description on Deed matches Application
- 11) Legal description on Land Use is the same as Application
- 12) Legal description on Pink Form is the same as Application
- 13) Site Address is filled out on Application
- 14) Site Address is filled out on Land Use
- 15) Site Address is filled out on Pink Form
- 16) Application is signed
- 17) Land Use is signed
- 18) Mailing Address of Applicant is filled out on back of form
- 19) Describe exactly what they are asking for on the front of application (DO NOT put see attachment).
- 20) Classification List is filled out on the Application
- 21) Authorized Agent signed
 - a. (is it a corporation, etc?) if so; Verification of position is attached
- 22) Letter of authorization is included
- 23) Agents mailing address is filled out (we need this for mailing packets)
- 24) Adjacent Property Owners are listed on back of application or attached
- 25) All addresses are filled out for Adjacent Property Owners (remember within 300' and outside perimeter)
Include Tribal when they are within Reservation Land even thou its privately owned
- 26) Parcel Map / Map Viewer showing property and adjacent property owners
- 27) Is Lakes Classification filled in (upper left-hand corner of application)
- 28) Is Zoning District filled in (upper left-hand corner of application)
- 29) Acreage Amount is filled in an Application and Land Use
- 30) Volume and Page is filled out on Application and Land Use

(Turn Over)

31) Plot plan is attached (MUST SHOW ALL REQUIREMENTS)

a. (North) is shown on plot plan

b. Setbacks are shown on plot plan

- North Lot Line
- South Lot Line
- East Lot Line
- West Line
- Road (Town, State/Fed, Private, etc.)
- Septic
- Well
- Lake(s)
- Wetland(s)
- Other _____

c. Lot Dimensions are shown on plot plan (i.e. 1,320 ft or 300' x 600')

d. Building Dimensions are shown on plot plan (i.e. 24' x 26')

- Residence
- Decks
- Porches
- Garages, etc.)

32) Application Fee Paid and ATF is Paid (if applicable)

a. Land Use Fee is Paid and ATF is Paid (if applicable)

b. Affidavit Fee Paid (Reg. of Deeds)

33) **Rezones**

a. Plot plan show zoning districts and adjacent property owners names

b. Subject property **must be marked** what it is going from and to (i.e. R-1 to R-RB)

34) **Wisconsin Wetland Inventory Map is attached**

35) Cost of Construction is filled in on Land Use

36) **EIA--6 copies of EIA are attached (if required)**

37) Data Base (Access) has been reviewed to verify property is code compliant

a. All Structures have been permitted

b. Sanitary Permitted When? _____

c. No violations Sanitary, etc.)



POSTED
4/26/21

PUBLIC HEARING

**BAYFIELD COUNTY PLANNING AND ZONING COMMITTEE
MAY 20, 2021 AT 4:00 P.M.
BOARD ROOM, COUNTY COURTHOUSE
WASHBURN, WISCONSIN**

The Bayfield County Planning and Zoning Committee of the County Board of Supervisors will hold a public hearing on Thursday, May 20, 2021 at 4:00 P.M. in the Board Room of the Bayfield County Courthouse in Washburn Wisconsin relative to the following:

#2 Septic Pumping & Excavating Inc, owner and Les & Chris Dykstra, agents request a conditional use permit to open and operate a non-metallic mine. Property is an Ag-1 zoning district; a 34.91-acre parcel (Tax ID# 21441) described as part of the NE ¼ of the NE ¼, in Doc# 2018R-572647, Section 28, Township 46 North, Range 5 West, Town of Kelly, Bayfield County, WI. **Included in this request will be the requirement(s) of the reclamation plan, which will be addressed separately.**

#2 Septic Pumping & Excavating Inc, owner and Les & Chris Dykstra, agents request a conditional use permit to open and operate a non-metallic mine. Property is an Ag-1 zoning district; a 40-acre parcel (Tax ID# 21443) described as NW ¼ of the NE ¼ in Doc# 2018R-572647, Section 28, Township 46 North, Range 5 West, Town of Kelly, Bayfield County, WI. **Included in this request will be the requirement(s) of the reclamation plan, which will be addressed separately.**

Tamara & Micah Jaespersion is petitioning for a zoning district map amendment (with wetlands). The parcel is a 40-acre parcel (Tax ID #27192), described as NW ¼ of the SW ¼, in Doc # 2018R-571857, Section 29, Township 48 North, Range 9 West, Town of Oulu, Bayfield County, WI from **F-1 to Ag-1.**

Mountaineer Properties LLC, owner and Melissa Driscoll, agent is petitioning for a zoning district map amendment. The parcel is a 1.03-acre parcel (Tax ID #3137) Doc #2019R-578430, described as Lot 1, CSM #1243, of Doc # 2003R-48754, Section 34, Township 45 North, Range 9 West, Town of Barnes, Bayfield County, WI from **Commercial to Industrial.**

Gabriel's Family Restaurant, owner(s) and Lane Eliason, agent request a conditional use permit to open and operate a firework store (82' x 25' = 2,050 sq. ft.). Property is in a commercial zoning district; a 0.15-acre parcel (Tax ID# 20432), described as Lots 11 & 12, Block 3, Original Plat of Iron River, in V. 749 P. 375, in Section 7, Township 47 North, Range 8 West, Town of Iron River, Bayfield County, WI.

Mathy Construction Co, owner and Eric Brye, agent request a conditional use permit to construct and operate a temporary asphalt plant. Property is two (2) parcels. *Parcel #1* is an Ag-1 zoning district; a 40-acre parcel (Tax ID# 14103); described as NE ¼ of the

SE ¼, in V. 945 P. 793 (Doc# 2006R-507115); and *Parcel #2* is an F-1 zoning district; a 34.49-acre parcel (Tax ID# 14089); described as the SE ¼ of the NE ¼, less Lot 1 of CSM# 1001 in V. 945 P. 793 (Doc# 2006R-507115) both parcels are in Section 30, Township 44 North, Range 7 West, Town of Drummond, Bayfield County, WI.

Robert & Corinne Rasmussen Trust request a conditional use permit for a multiple unit development (consisting of converting a (4)-unit structure (48' x 50' =1,848 sq. ft.-irregular shaped) into (4)-units of either professional or office or apartments; maybe a combination and food shelf space). Property is in a commercial zoning district; a 1.089-acre parcel (Tax ID# 38469), described as Lot 3, Block 7, Assessor's Plat No. 2, less parcel described in V. 1033 & less parcel described in Doc# 2021R-587994, in Section 18, Township 43 North, Range 7 West, Town of Cable, Bayfield County, WI. **Included in this request will be the requirement(s) of an EIA, which the owner has requested be waived.**

Copies of all items, petition(s) and/or proposed amendments are available online at (<https://www.bayfieldcounty.org/198/Planning-Zoning-Committee>). Scroll down to Agendas & Minutes. Click on Most Recent Agenda.

All interested parties are invited to attend said hearing to be heard. Any person wishing to attend who, because of a disability, requires special accommodations, should contact the Planning and Zoning office at 373-6138, at least 24 hours before the scheduled meeting time, so appropriate arrangements can be made. Immediately after the public hearing, the Planning and Zoning Committee will hold its regular monthly meeting.

If further information is desired, please contact the Bayfield County Planning and Zoning Department, at the Courthouse, Washburn Wisconsin - Telephone (715) 373-6138 or visit our website: <http://www.bayfieldcounty.org/147>.

Robert D. Schierman, Director
Bayfield County Planning and Zoning Department

AGENDA



Bayfield County Planning and Zoning Committee

Public Hearing and Public Meeting

Thursday, May 20, 2021

4:00P.M.

Board Room, County Courthouse, Washburn, WI

Committee Members: Brett Rondeau; Charly Ray; Jeff Silbert; Fred Strand and Dave Zepczyk

1. Call to Order of Public Hearing

2. Roll Call:

3. Affidavit of Publication:

4. Public Comment – [3 minutes per citizen]

5. Review of Meeting Format – (Hand-Out Slips to Audience)

6. Public Hearing: (*open for public comment*)

- (A) **No Two Septic Pumping/Excavating Inc/Les & Chris Dykstra** (Kelly) – rec plan in Ag-1 zone
- (B) **No Two Septic Pumping/Excavating Inc/Les & Chris Dykstra** (Kelly) – non-metallic mine in Ag-1 zone
- (C) **No Two Septic Pumping/Excavating Inc/Les & Chris Dykstra** (Kelly) – rec plan in Ag-1 zone
- (D) **No Two Septic Pumping/Excavating Inc/Les & Chris Dykstra** (Kelly) – non-metallic mine in Ag-1 zone
- (E) **Tamara & Micah Jaespersion** (Oulu) – rezone property (w/wetlands) from F-1 to Ag-1
- (F) **Mountaineer Properties LLC/Melissa Driscoll** (Barnes) – rezone property from Commercial to Industrial
- (G) **Gabriel's Family Restaurant/Lane Eliason** (Iron River) – firework stand in Commercial zone
- (H) **Mathy Construction Co/Eric Brye** (Drummond) – temporary asphalt plant in F-1 and Ag-1 zones
- (I) **Robert & Corinne Rasmussen Trust** (Cable) – multiple unit development (4-Unit) in Commercial zone

7. Adjournment of Public Hearing:

8. Call to Order of Planning and Zoning Committee Business Meeting:

9. Roll Call:

10. Previous Business: (*public comments at discretion of Committee*)

- (A) **Milo Properties LLC/Lori Raven** (Barnes) – rezone property from R-2 to R-1 (**tabled 3/18/2021**)
- (A) **No Two Septic Pumping/Excavating Inc/Les & Chris Dykstra** (Kelly) – rec plan in Ag-1 zone (**tabled 4/15/2021**)
- (B) **No Two Septic Pumping/Excavating Inc/Les & Chris Dykstra** (Kelly) – non-metallic mine in Ag-1 zone (**tabled 4/15/2021**)
- (C) **No Two Septic Pumping/Excavating Inc/Les & Chris Dykstra** (Kelly) – rec plan in Ag-1 zone (**tabled 4/15/2021**)
- (D) **No Two Septic Pumping/Excavating Inc/Les & Chris Dykstra** (Kelly) – non-metallic mine in Ag-1 zone (**tabled 4/15/2021**)

11. New Business: *(public comments at discretion of Committee)*

- (E) **Tamara & Micah Jaesperson** (Oulu) – rezone property from F-1 to Ag-1
- (F) **Mountaineer Properties LLC/Melissa Driscoll** (Barnes) – rezone property from Commercial to Industrial
- (G) **Gabriel’s Family Restaurant/Lane Eliason** (Iron River) – operate a firework stand in Commercial zone
- (H) **Mathy Construction Co/Eric Brye** (Drummond) – temporary asphalt plant in F-1 and Ag-1 zones
- (I) **Robert & Corinne Rasmussen Trust** (Cable) – multiple unit development (4-Units) in Commercial zone

Agenda Review/Alteration

12. Other Business: *(public comments at discretion of Committee)*

- (J) **Minutes of Previous Meeting(s):** February 18, 2021; March 18, 2021 & April 15, 2021
- (K) **Committee Members discussion(s):** regarding matters of the P & Z Dept.

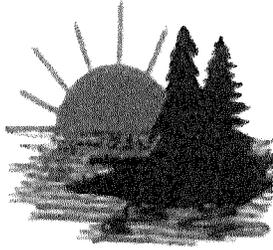
13. Monthly Report / Budget and Revenue

14. Adjournment **Robert D. Schierman, Director**
 Bayfield County Planning and Zoning Department

Note: Any aggrieved party may appeal the Planning and Zoning Committee’s decision to the Board of Adjustment within **30-days** of the final decision.

Any person wishing to attend who, because of a disability, requires special accommodations, should contact the Planning and Zoning office at 373-6138, at least 24 hours before the scheduled meeting time, so appropriate arrangements can be made.

Please Note: Receiving approval from the Planning and Zoning Committee **does not authorize the beginning of construction or land use; you must first obtain land use application/permit card(s) from the Planning and Zoning Department.**



BAYFIELD COUNTY PLANNING AND ZONING DEPARTMENT

Bayfield County Courthouse
117 East Fifth Street
Post Office Box 58
Washburn, WI 54891

Telephone: (715) 373-6138
Fax: (715) 373-0114

E-mail: zoning@bayfieldcounty.org
Web Site: www.bayfieldcounty.org/zoning

April 27, 2021

Robert & Corinne Rasmussen
PO Box 540
Cable WI 54821

We are sending you this letter to advise you of the upcoming **Bayfield County Planning and Zoning Committee Public Hearing and Meeting**. This notice is also being sent to adjoining landowners; owners of land within 300 feet of the proposed use; the town clerk of the town in which the property is located, and the town clerk of any other town within 300 feet of the proposed use.

This written notice is in regard to a **Conditional Use Application** for multiple unit development submitted by **Robert & Corinne Rasmussen**.

To obtain information regarding this request; please visit our web site:
<http://www.bayfieldcounty.org/198/Planning-Zoning-Committee>. Scroll down to Agendas & Minutes. Click on Most Recent Agenda.

This matter will be addressed by the Bayfield County Planning and Zoning Committee at their meeting on **Thursday, May 20, 2021 at 4:00 pm** in the County Board Room of the Bayfield County Courthouse, Washburn Wisconsin.

Be advised; the Town of Cable will consider this application prior to the Planning and Zoning Committee meeting (please call the Town Clerk to verify the date and time of their meeting and the date and time of the Plan Commission Meeting).

If you wish to comment on this matter, you are invited to attend the hearing or write to the Bayfield County Planning and Zoning Department. If any person planning to attend this meeting has a disability requiring special accommodations, please contact the Planning and Zoning Department 24 hours before the scheduled meeting, so appropriate arrangements can be made.

Note: Written and digital input pertaining to any agenda items will be accepted ***until noon the day prior*** to the Planning and Zoning Committee Meeting (Section 13-1-41(b)(1) and 13-1-41A(b)(2)). Subsequent input must be delivered in person at the meeting. Any aggrieved party may appeal the Planning and Zoning Committee's decision to the Board of Adjustment within **30-days** of the final decision.

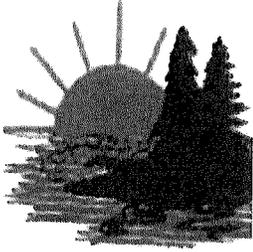
Sincerely,

Bayfield County Planning and Zoning Department

enc. public hearing notice

cc: Town Clerk
Adjacent Property Owners (15)
Planning and Zoning Committee Members (5)
Office File (Sent by Zoning)
Application Packet (cover letter and notice)

**** Please Note: Receiving approval from the Planning and Zoning Committee at the meeting does not authorize the beginning of construction or land use; you must first obtain land use application/permit card(s) from the Planning and Zoning Department.**



BAYFIELD COUNTY PLANNING AND ZONING DEPARTMENT

Bayfield County Courthouse
117 East Fifth Street
Post Office Box 58
Washburn, WI 54891

Telephone: (715) 373-6138
Fax: (715) 373-0114

E-mail: zoning@bayfieldcounty.wi.gov
Web Site: www.bayfieldcounty.org/147

May 28, 2021

Robert & Corinne Rasmussen
42890 Lake Ridge Rd
Cable, WI 54821

Note:

Incomplete and/or unfinished applications expire 4 months from the date of this letter.

RE: (After-the-Fact) Conditional Use Application (Classification List: Multiple Unit Development) (*EIA required) requesting consisting of converting a (4)-unit structure (48' x 50' =1,848 sq. ft.-irregular shaped) into (4)-units of either professional or office or apartments; maybe a combination and food shelf space.

Property is a commercial zoning district; a 1.089-acre parcel (Tax ID# 38469), described as Lot 3, Block 7, Assessor's Plat No. 2, less parcel described in V. 1033 & less parcel described in Doc# 2021R-587994, in Section 18, Township 43 North, Range 7 West, Town of Cable, Bayfield County, WI.

Mr. & Ms. Rasmussen:

As you know, the Bayfield County Planning and Zoning Committee conducted a public hearing / meeting on May 20, 2021, where you Robert Rasmussen informed the Committee of your application for **the above mentioned**. After discussion and review, the Planning and Zoning Committee **approved** your request **with a condition** and based on Town Board Support, plus waive the EIA and the Community and General Welfare and Economic Impacts of the proposal.

The approval includes the following:

- Classification List: Classification List: Multiple Unit Development) (*EIA required)
 - **Granted:** Waiver of EIA and allow Converting a (4)-unit structure (48' x 50' =1,848 sq. ft.-irregular shaped) into (4)-units of either professional or office or apartments; maybe a combination and food shelf space.

with the following conditions:

- ATF Fees are required

Additional Conditions placed by (Planning and Zoning Dept)

- ❖ Licensing required from the Bayfield County Health Dept (if applicable)

- ❖ Town of Cable room tax required (if applicable)
- ❖ Any additions/alterations to structures require land use application(s) and fee(s)
- ❖ Sanitation requirements must be in compliance with State regulations
- ❖ Uniform Dwelling Code requirements must be in compliance with State regulations

Congratulations on obtaining this approval. Be advised any aggrieved party has the right to appeal this decision to the Board of Adjustment within thirty (30) days.

Enclosed is a copy of the affidavit prepared by this Dept. setting forth the terms and conditions of your permit. Your \$30 check and the original affidavit will be taken to the Reg. of Deeds Office for recording. After recordation, your permit card will be mailed to you provided all requirements have been met and/or submitted.

Please note, receiving approval from the Planning and Zoning Committee at the meeting, **does not authorize the beginning of construction or land use, you must first obtain individual land use application(s) / permit(s) from the Planning and Zoning Department.** Terms and conditions of your permit shall be binding upon, and inure to the benefit of, all current and future owners of such property.

Also, this permit entitles you to the work specifically described in the application and plans, and as limited by any conditions of this permit. No changes in the project or plans may be made without prior approval of the Bayfield County Zoning Committee. The issuance of this permit does not relieve you of your responsibility to obtain a permit or approval required by your township, State of WI, or federal authority (i.e., US Army Corps of Engineers).

Be advised your Conditional Use permit shall automatically terminate 12 months from its date of issuance if the authorized building activity, land alteration or use has not begun within such time. If your Conditional Use is discontinued for 36 consecutive months, the permit authorizing it shall automatically terminate, and any future use of the building(s) or property to which the permit pertained shall conform to Ordinance.

Any person aggrieved by a decision of the Planning and Zoning Director and/or Planning and Zoning Committee, may request a public hearing before the Board of Adjustment. The appeal notice shall be filed with the Planning and Zoning Director within thirty (30) days after written notice of the order or decision appealed from was sent by first class mail to the aggrieved party.

Thank you for your cooperation and please let our office know if you have any questions or comments.

Sincerely,



Robert D. Schierman, Director
Bayfield County Planning and Zoning Department

enc: copy of affidavit

cc: Elaine Miller, Town Clerk
Office File

AFFIDAVIT

On May 20, 2021, the owner(s) were granted by the Bayfield County Planning and Zoning Committee a:

Conditional Use

Classification List

[After-the Fact] Multiple Unit Development (*EIA required)

Requested

Converting a (4)-unit structure (48' x 50' =1,848 sq. ft.-irregular shaped) into (4)-units of either professional or office or apartments; maybe a combination and food shelf space.

Return to:
Bayfield County Zoning

Property Owner: Robert & Corinne Rasmussen

Property Description: A commercial zoning district; a 1.089-acre parcel (Tax ID# 38469), described as Lot 3, Block 7, Assessor's Plat No. 2, less parcel described in V. 1033 & less parcel described in Doc# 2021R-587994, in Section 18, Township 43 North, Range 7 West, Town of Cable, Bayfield County, WI

This use of the property is subject to the following terms and conditions:

- Classification List: Classification List: Multiple Unit Development) (*EIA required)
 - **Granted:** Waiver of EIA and allow Converting a (4)-unit structure (48' x 50' =1,848 sq. ft.-irregular shaped) into (4)-units of either professional or office or apartments; maybe a combination and food shelf space.

with the following conditions:

- ATF Fees are required

Additional Conditions placed by (Planning and Zoning Dept)

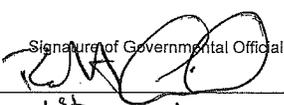
- ❖ Licensing required from the Bayfield County Health Dept (if applicable)
- ❖ Town of Cable room tax required (if applicable)
- ❖ Any additions/alterations to structures require land use application(s) and fee(s)
- ❖ Sanitation requirements must be in compliance with State regulations
- ❖ Uniform Dwelling Code requirements must be in compliance with State regulations

The purpose of this affidavit is to make the foregoing a matter of public record in the office of the Bayfield County Register of Deeds, per Bayfield County Planning & Zoning Ordinance, Title 13, Chapter 1, Article C, Section 13-1-41:

"If a conditional use permit is approved with conditions, an appropriate record shall be made of the land use and structures permitted, and prior to the issuance of the permit the Zoning Department shall record with the Bayfield County Register of Deeds an affidavit prepared by the Zoning Department setting forth the terms and conditions of the permit and a legal description of the property to which they pertain. The recording fee shall be paid by the applicant. The terms and conditions of the permit shall be binding upon and inure to the benefit of all current and future owners of the property to which it pertains unless otherwise expressly provided by the permit, or unless the permit terminates under subsection (d) of this section."

Also, this permit entitles you to the work specifically described in the application and plans, and as limited by any conditions of this permit. No changes in the project or plans may be made without prior approval of the Bayfield County Zoning Committee. The issuance of this permit does not relieve you of your responsibility to obtain a permit or approval required by your township, State of WI, or federal authority (i.e., US Army Corps of Engineers).

Be advised your conditional use permit shall automatically terminate 12 months from its date of issuance if the authorized building activity, land alteration or use has not begun within such time. If your conditional use is discontinued for 36 consecutive months, the permit authorizing it shall automatically terminate, and any future use of the building(s) or property to which the permit pertained shall conform to Ordinance.

<p>Bayfield County Planning & Zoning Dept. Governmental Official Printed Name and Title: Robert D. Schierman, Director Signature of Governmental Official:  On this <u>1st</u> day of <u>June</u>, 2021</p>	<p>This instrument was signed before me in the State of Wisconsin, County of Bayfield on this _____ day of _____, 2021 by: _____ Notary Public My commission expires on: _____</p>
---	--

Receiving approval from the Planning and Zoning Committee at the meeting does not authorize the beginning of construction or land use; you must first obtain land use application/permit card(s) from the Zoning Department.

AFFIDAVIT

On May 20, 2021, the owner(s) were granted by the Bayfield County Planning and Zoning Committee a:

Conditional Use

Classification List

[After-the Fact] Multiple Unit Development (*EIA required)

Requested

Converting a (4)-unit structure (48' x 50' =1,848 sq. ft.-irregular shaped) into (4)-units of either professional or office or apartments; maybe a combination and food shelf space.

Property Owner: Robert & Corinne Rasmussen

Property Description: A commercial zoning district; a 1.089-acre parcel (Tax ID# 38469), described as Lot 3, Block 7, Assessor's Plat No. 2, less parcel described in V. 1033 & less parcel described in Doc# 2021R-587994, in Section 18, Township 43 North, Range 7 West, Town of Cable, Bayfield County, WI

This use of the property is subject to the following terms and conditions:

- Classification List: Classification List: Multiple Unit Development) (*EIA required)
 - **Granted:** Waiver of EIA and allow Converting a (4)-unit structure (48' x 50' =1,848 sq. ft.-irregular shaped) into (4)-units of either professional or office or apartments; maybe a combination and food shelf space.

with the following conditions:

- ATF Fees are required

Additional Conditions placed by (Planning and Zoning Dept)

- ❖ Licensing required from the Bayfield County Health Dept (if applicable)
- ❖ Town of Cable room tax required (if applicable)
- ❖ Any additions/alterations to structures require land use application(s) and fee(s)
- ❖ Sanitation requirements must be in compliance with State regulations
- ❖ Uniform Dwelling Code requirements must be in compliance with State regulations

The purpose of this affidavit is to make the foregoing a matter of public record in the office of the Bayfield County Register of Deeds, per Bayfield County Planning & Zoning Ordinance, Title 13, Chapter 1, Article C, Section 13-1-41:

"If a conditional use permit is approved with conditions, an appropriate record shall be made of the land use and structures permitted, and prior to the issuance of the permit the Zoning Department shall record with the Bayfield County Register of Deeds an affidavit prepared by the Zoning Department setting forth the terms and conditions of the permit and a legal description of the property to which they pertain. The recording fee shall be paid by the applicant. The terms and conditions of the permit shall be binding upon and inure to the benefit of all current and future owners of the property to which it pertains unless otherwise expressly provided by the permit, or unless the permit terminates under subsection (d) of this section."

Also, this permit entitles you to the work specifically described in the application and plans, and as limited by any conditions of this permit. No changes in the project or plans may be made without prior approval of the Bayfield County Zoning Committee. The issuance of this permit does not relieve you of your responsibility to obtain a permit or approval required by your township, State of WI, or federal authority (i.e., US Army Corps of Engineers).

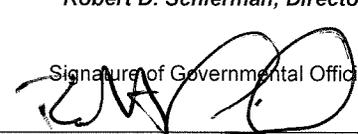
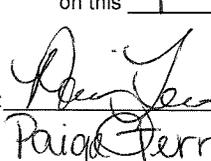
Be advised your conditional use permit shall automatically terminate 12 months from its date of issuance if the authorized building activity, land alteration or use has not begun within such time. If your conditional use is discontinued for 36 consecutive months, the permit authorizing it shall automatically terminate, and any future use of the building(s) or property to which the permit pertained shall conform to Ordinance.



2021R-589027

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
06/02/2021 08:00AM
TF EXEMPT #:
RECORDING FEE: 30.00
PAGES: 3

Return to:
Bayfield County Zoning

<p>Bayfield County Planning & Zoning Dept. Governmental Official Printed Name and Title: Robert D. Schierman, Director</p> <p>Signature of Governmental Official: </p> <p>On this <u>1st</u> day of <u>June</u>, 2021</p>	<p>This instrument was signed before me in the State of Wisconsin, County of Bayfield</p> <p>on this <u>1</u> day of <u>June</u>, 2021</p> <p>by:  Paige Perry, Notary Public</p> <p>My commission expires on: <u>2/8/25</u></p>
--	--

Receiving approval from the Planning and Zoning Committee at the meeting does not authorize the beginning of construction or land use; you must first obtain land use application/permit card(s) from the Zoning Department.

Exhibit A

Attachment A

A parcel of land (being a part of the former Chicago and North Western Transportation Company railroad right-of-way) located in the Southeast Quarter of the Northwest Quarter (SE¼ - NW¼) of Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, situated in the Village of Cable, Bayfield County, State of Wisconsin, more particularly described as follows:

Beginning at a point lying 59.72 feet N 16°52'46" E of the SW corner of Lot Three (3) of Block Eight (8) of Assessor's Plat No. 2, Village of Cable, located on the Easterly boundary of the former railroad right-of-way;

Thence Northwesterly across the former railroad right-of-way a distance of 100 feet to an iron pipe marking the NE corner of Lot Four (4) of Block Seven (7) of Assessor's Plat No. 2, Village of Cable, Bayfield County;

Thence Northeasterly along the East line of Lot Three (3) of Block Seven (7) of Assessor's Plat No. 2, Village of Cable, being the Westerly boundary of the former railroad right-of-way, 385.11 feet to an iron pipe being 40 feet South Westerly of the Northeasterly corner of Lot Three (3) of Block Seven (7) of Assessor's Plat No. 2:

Thence Southeasterly a distance of 100 feet to a point on the Easterly boundary of the former railroad right-of-way,

Thence Southwesterly along the Easterly boundary of the former railroad right-of-way a distance of 385.11 feet, more or less, to the Point of Beginning.

AND

Lots One (1), Two (2) and Three (3), recorded in Certified Survey Map 581, Volume 4, Pages 174-175, Document No. 368130, being located in Assessor's Plat No. 2, Section Eighteen (18), Township Forty-Three (43) North, Range Seven (7) West, in the Town of Cable, Bayfield County, State of Wisconsin.

Less the following:

Parcel "A" as described on the Plat of Survey attached hereto (2 pages) having a legal description as follows: A parcel of land located in part of Lot Three (3), Block Eight (8), Assessor's Plat No. 2 and part of the adjacent Chicago and Northwestern R.R./W being part of the Southeast Quarter of the Northwest Quarter (SE¼ - NW¼), Section Eighteen (18), Township Forty-three (43) North, Range Seven (7) West, Town of Cable, Bayfield County, Wisconsin, described as follows: Beginning at the SW corner of said Lot 3; thence N 77°42'24" W, 8.58 feet; thence N 12°28'42" E, 68.15 feet to the North line of a 20 foot roadway easement; thence S 73°12'44" E along said North line, 163.78 feet to the Westerly line of First Avenue North; thence S 16°52'46" W along said Westerly line, 40.00 feet; thence N. 73°12'44" W, 64.96 feet; thence S 16°52'46" W, 20.60 feet; thence N 77°42'24" W, 85.31 feet to the point of beginning. Subject to the

Northerly 20 feet thereof being used for roadway purposes and all other easements and reservations of record. The above parcel contains 8792 square feet or 0.20 acres of land, more or less. Cable Lumber & Home, Inc. joins in the execution of this deed solely for the purpose of terminating any leasehold interest that it may have in the parcel conveyed herein.

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **City**
SIGN –
SPECIAL –
CONDITIONAL – **ZC 5/20/2021**
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0191** Issued To: **Robert & Corinne Rasmussen**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **18** Township **43** N. Range **7** W. Town of **Cable**

Gov't Lot Lot **3** Block **7** Subdivision **Assessors Plat No 2** CSM#

For: Commercial Other: [**2- Story; Converting a (4)-unit structure (48' x 50' =1,848 sq. ft.-irregular shaped) into (4)-units of either professional or office or apartments; maybe a combination and food shelf space (Waiver of EIA)]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): ATF Fees are required. Additional Conditions placed by (Planning and Zoning Dept). Licensing required from the Bayfield County Health Dept (if applicable). Town of Cable room tax required (if applicable). Any additions/alterations to structures require land use application(s) and fee(s). Sanitation requirements must be in compliance with State regulations. Uniform Dwelling Code requirements must be in compliance with State regulations.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 24, 2021

Date

PERMIT: CG. LETED APPLICATION, TAX
 FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0192
Date:	6-24-21
Amount Paid:	\$750 6-3-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
 Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: STEVE & LAWRENCE LATTERAL		Mailing Address: P.O. Box 211		City/State/Zip: CABLE, WI 54821		Telephone: 715-319-1340 612-987-1931 Cell Phone:		
Address of Property: 43990 KAWANOA RD		City/State/Zip: CABLE WI 54821					Plumber Phone:	
Contractor: SELF		Contractor Phone:		Plumber:				
Authorized Agent: (Person Signing Application on behalf of Owner(s)) KARL BASTOSKY		Agent Phone: 715 580-0157		Agent Mailing Address (include City/State/Zip): 14295 MCNAUGHT RD CABLE, WI 54821		Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID# 10025		Recorded Document: (Showing Ownership) 2016 R 565185		
1/4, 1/4		Gov't Lot	Lot(s)	CSM	Vol & Page	CSM Doc #	Lot(s) #	Block #
Section 18, Township 43 N, Range 7 W		Town of: CABLE		Subdivision: ASSESSORS PLAT		Lot Size 400x 350		Acreage 2.8

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage? If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ 250,000	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: CONV. (404)-16-1395	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Year Round	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	

Existing Structure: (if addition, alteration or business is being applied for)	Length: _____	Width: _____	Height: _____
Proposed Construction: (overall dimensions)	Length: _____	Width: _____	Height: _____

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	130 x 348	1330
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	122 x 28x82	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(6 x 16)	96
		with (2nd) Deck	(6 x 12)	72
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	1498

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Karl Bastosky
 (If you are signing on behalf of the owner a letter of authorization must accompany this application)

Date _____
 Date 5/17/2021

Address to send permit 14295 MCNAUGHT RD CABLE, WI 54821

Attach
 Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(* Driveway and (* Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)**
- (6) Show any (*): **(* Lake; (* River; (* Stream/Creek; or (* Pond**
- (7) Show any (*): **(* Wetlands; or (* Slopes over 20%**

SEE ATTACHED SITE PLAN FROM
HEART OF THE NORTH SURVEYING.

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	150 Feet	Setback from the Lake (ordinary high-water mark)	_____ Feet
Setback from the Established Right-of-Way	100 Feet	Setback from the River, Stream, Creek	_____ Feet
<i>PROPOSED BOUNDARIES</i>		Setback from the Bank or Bluff	_____ Feet
Setback from the North Lot Line	50 Feet		
Setback from the South Lot Line	60 Feet	Setback from Wetland	_____ Feet
Setback from the West Lot Line	100 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	200 Feet	Elevation of Floodplain	_____ Feet
Setback to Septic Tank or Holding Tank	10 Feet	Setback to Well	80 Feet
Setback to Drain Field	25 Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-0192		Permit Date: 6-24-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Deed of Record	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fused/Contiguous Lot(s)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Affidavit Required
				Affidavit Attached
Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was Parcel Legally Created	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Map illustrating split	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Was Property Surveyed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record:				Zoning District (R-1)
				Lakes Classification (N/A)
Date of Inspection: 6/10/21	Inspected by: AD	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)				
Build as proposed Get required UDC Inspections				
Signature of Inspector: AD				Date of Approval: 6/18/21
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>



FLOWS AND LOADS AFFIDAVIT

2021R-589232

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
06/11/2021 10:47AM
TF EXEMPT #:
RECORDING FEE: 30.00
PAGES: 1

Legal Description:

NW 1/4, NE 1/4, Section 18, Township 43 N, Range 7 W

Add'l Legal _____

_____ Gov't Lot _____

Lot 1 Block 3 Subdivision or CSM ASSESSORS ^{No 2} Plat

CSM Doc # (required) _____ CSM Vol/Page _____

Tax ID # 10025 Township CABLE

Property Owner STEVE LATTERELL

Mailing Address 43970 KAUBAUGH RD

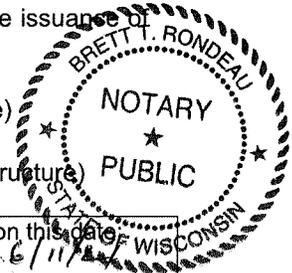
City, State, Zip CABLE, WI 54821

Recording Area

Return To:
Planning and Zoning Dept

It has been determined that the existing private sewage system (or components thereof) located on the above described parcel of land is sized for # 3 bedrooms and 450 gallons per day. Therefore the POWTS is not adequately sized to accommodate an increase in the number of bedrooms for the dwelling served or to be served. To resolve this situation without replacing the private sewage system at this time, the owner(s) of the above described property agree to the following stipulations:

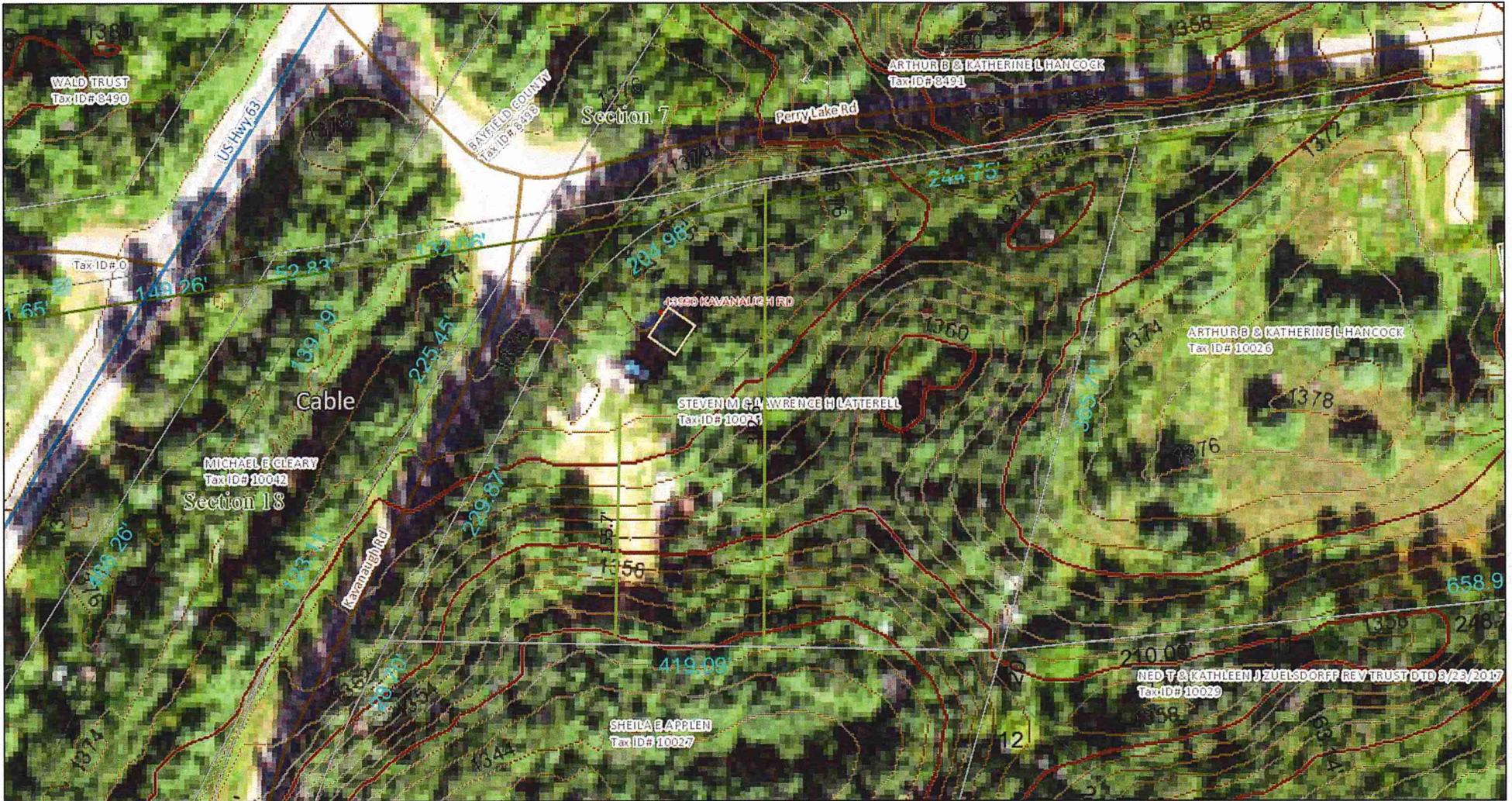
1. Occupancy exceeding this number may constitute a violation of State and County private sewage system regulations. The Governmental Unit may issue orders to correct and/or may commence legal action if at any time it is determined that occupancy exceeds the maximum listed number contrary to this agreement.
2. It is understood when the existing POWTS fails it shall be replaced with a properly sized and code compliant private sewage system. This information is on file in the office of the County Planning & Zoning Department.
3. This Agreement is binding upon the Owner and his/her heirs, successors, and assignees. The Owner shall have this Agreement filed and recorded with the County Register of Deeds in a manner which will permit the existence of the Agreement to be determined by reference to the Property containing the sewage system.
4. This Agreement will remain in effect until the Governmental Unit, responsible for the issuance of sanitary permits for POWTS, certifies that this restriction is no longer required.
 - > 450 gallons per day or 6 persons (maximum occupancy for structure)
 - > _____ gallons per day or _____ persons (child occupancy for day care in structure)



Owner(s) Name(s) – Please Print <u>Steven M Latterell</u>	Subscribed and sworn to before me on this <u>11th</u> day of <u>June</u> , 20 <u>21</u> <u>Brett T. Rondeau</u>
Notarized Owner(s) – Signature(s) <u>[Signature]</u>	Notary Public <u>Brett T. Rondeau</u> My Commission Expires: <u>2/2022 Bayfield County, WI</u>

Drafted by: Steve Latterell Date: 6-11-21

Bayfield County, WI



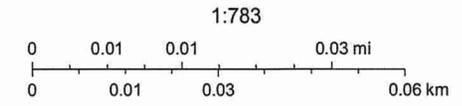
6/7/2021, 3:58:27 PM

Building Footprint Outline 2009-2015

- | | | | |
|--------------------|-----------------------------|--------------------------------|--------------|
| Changed | Douglas Co Parcels | Section Lines | County |
| Demolished | Rivers | Government Lot | Town |
| Existing | Lakes | Municipal Boundary | CFR |
| New | Tie Lines | Red Cliff Reservation Boundary | Private |
| Unknown | Meander Lines | All Roads | Driveways |
| Ashland Co Parcels | Approximate Parcel Boundary | Federal | Buildings |
| | State | UnRecorded Map | Recorded Map |

- Corner Tie Sheets
- Section Corner Monument on File
 - Section Corner Monument Referenced on Survey
- Survey Maps
- bayfield_gis.SDE.T_Cable
 - Index

- Intermediate
- bayfield_gis.SDE.T_Bayview
- Index
- Intermediate
- bayfield_gis.SDE.T_Bayfield
- Index
- Intermediate



Bayfield County Land Records

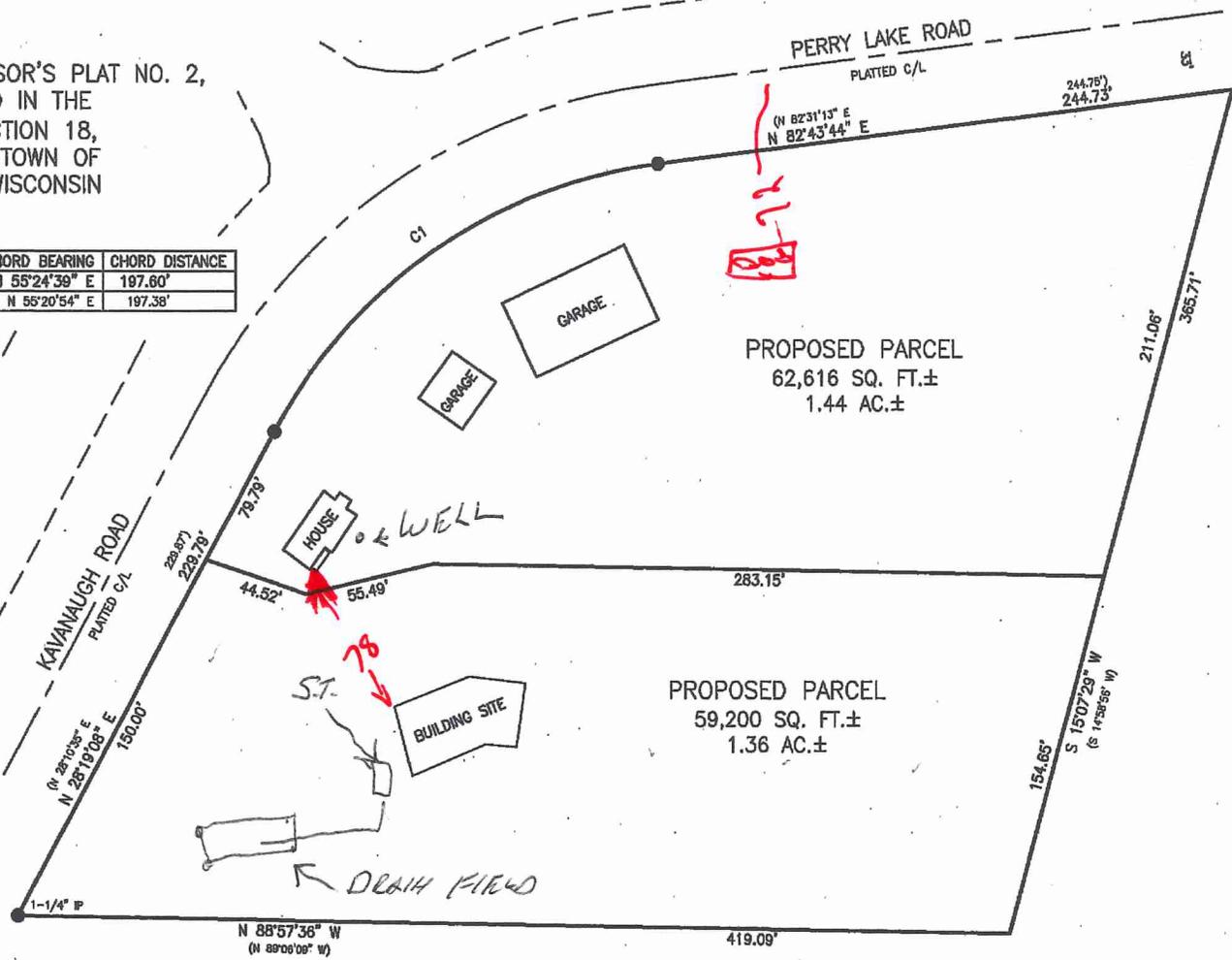
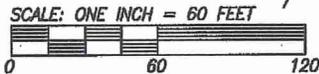
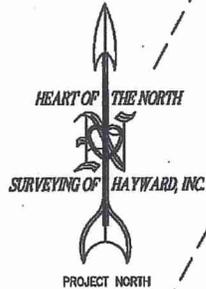
SITE PLAN

LOT 1, BLOCK 3 OF ASSESSOR'S PLAT NO. 2,
VILLAGE OF CABLE, LOCATED IN THE
NW 1/4 - NE 1/4 OF SECTION 18,
T. 43 N., R. 7 W., IN THE TOWN OF
CABLE, BAYFIELD COUNTY, WISCONSIN

CURVE TBALC

CURVE	ARC	RADIUS	DELTA	CHORD BEARING	CHORD DISTANCE
C1	205.22°	216.11'	54°24'34"	N 55°24'39" E	197.60'
(REC)	204.98°	216.11'	54°20'38"	N 55°20'54" E	197.38'

LOT 1
BLOCK 3
121,816 SQ. FT.±
2.80 AC.±



LEGEND
● FOUND 2" CAPPED IRON PIPE (IP), UNLESS NOTED
() RECORDED DATA

CLIENT: STEVE LATTERELL
JOB NO: H21/
SCALE: 1" = 60'
NB. B-31 Pg. 19
FIELD WORK COMPLETED: 4/15/21

FILE: M/T43NR7W/SEC18
ACAD: H21_LATTERELL
COORD: H21_LATT

HEART OF THE NORTH
SURVEYING OF HAYWARD, INC.

PH: 715/634-2442
FAX: 715/634-6444
10339N DUFFY ROAD
HAYWARD, WI 54843
WWW.HONSURVEYING.COM

Real Estate Bayfield County Property Listing

Today's Date: 2/25/2020

Property Status: Current

Created On: 3/15/2006 1:15:08 PM

Description Updated: 3/8/2019

Tax ID: 10025
PIN: 04-012-2-43-07-18-2 00-116-00900
Legacy PIN: 012116501000
Map ID:
Municipality: (012) TOWN OF CABLE
STR: S18 T43N R07W
Description: ASSESSOR'S PLAT NO. 2 LOT 1 BLOCK 3 IN 2016R- 565185 5AV
Recorded Acres: 3.000
Calculated Acres: 2.796
Lottery Claims: 0
First Dollar: Yes
Zoning: (R-1) Residential-1
ESN: 108

Tax Districts Updated: 3/15/2006

1 STATE
 04 COUNTY
 012 TOWN OF CABLE
 041491 SCHL-DRUMMOND
 001700 TECHNICAL COLLEGE
 047110 CABLE SANITARY DISTRICT #1

Recorded Documents Updated: 3/15/2006

WARRANTY DEED
 Date Recorded: 9/12/2016 **2016R-565185**
CONVERSION
 Date Recorded: 475394 459-215;666-296;831-870

Ownership Updated: 3/8/2019

STEVEN M & LAWRENCE H LATTERELL CABLE WI

Billing Address: **Mailing Address:**
STEVEN M & LAWRENCE H LATTERELL **STEVEN M & LAWRENCE H LATTERELL**
 PO BOX 241 PO BOX 241
 CABLE WI 54821-0241 CABLE WI 54821-0241

Site Address * indicates Private Road
 43990 KAVANAUGH RD CABLE 54821

Property Assessment Updated: 3/27/2019

2020 Assessment Detail			
Code	Acres	Land	Imp.
G1-RESIDENTIAL	3.000	17,000	18,400
2-Year Comparison			
	2019	2020	Change
Land:	17,000	17,000	0.0%
Improved:	18,400	18,400	0.0%
Total:	35,400	35,400	0.0%

Property History

N/A

BAYFIELD COUNTY

SANITARY PERMIT (#04)-16-139S

STATE SANITARY PERMIT

OWNER: STEVEN LATTERELL

GOV'T LOT: LOT: 1 BLK: 3

CSM:

SUBDIVISION: Assessor

1/4 1/4 SEC: 18, T 43 N, R 7 W

TOWNSHIP: CABLE

SOIL TEST: 111-16

NEW SYSTEM

SYSTEM TYPE: Non-Pressurized In-Ground

PLUMBER: A. RASMUSSEN & SONS

JOSH ROWLEY

DATE: 10/14/2016

Authorized Issuing Officer

PREVIOUS PERMIT #:

LICENSE: # 221516

Condition:

CHAPTER 145.135(2) WISCONSIN STATUTES

- a. The purpose of the sanitary permit is to allow installation of the private sewage system described in the permit.
- b. The approval of the sanitary permit is based on regulations in force on the date of approval.
- c. The sanitary permit is valid and may be renewed for specified period.
- d. Changed regulations will not impair the validity of a sanitary permit.
- e. Renewal of the sanitary permit will be based on regulations in force at the time renewal is sought, and that changed regulations may impede renewal.
- f. The sanitary permit is transferable.

History: 1977 c. 168; 1979 c. 34,221; 1981 c. 314

Note: If you wish to renew the permit, or transfer ownership of the permit, please contact the county authority.

THIS PERMIT EXPIRES 10/14/2018

POST IN PLAIN VIEW

MUST BE VISIBLE FROM ROAD FRONTING THE LOT DURING CONSTRUCTION

P. 2
No. 9382
BAYFIELD CO PLANNING & ZONING
Oct. 14. 2016 12:56PM

POKEM LISC# 981619
CONTRACT# 1108212

MP
JFK 223307

JOK OLSON 715-669-9720



Karl Kastrosky
Land Development & Zoning Consultant

14295 McNaught Rd. Cable, WI 54821

715-580-0157

Kastrosky821@gmail.com

To Whom it may concern,

I hereby authorize **Karl Kastrosky** to act as my agent to procure permits and

access information pertaining to my property at 43990 KAUBANAUCH ROAD

in the Town of CABLE County of BAYFIELD.


Lawrence H. Lattinell

Signature

3/9/2021

3/9/2021

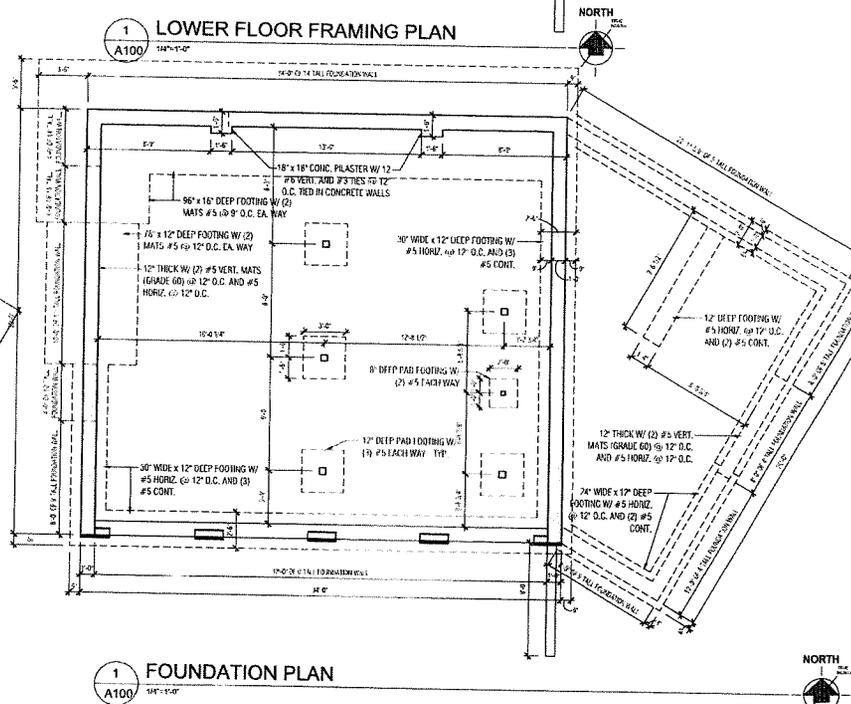
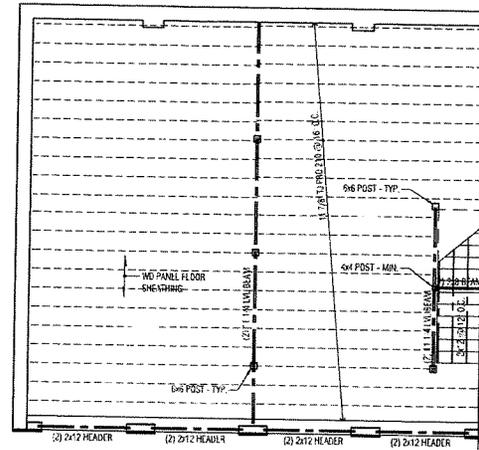
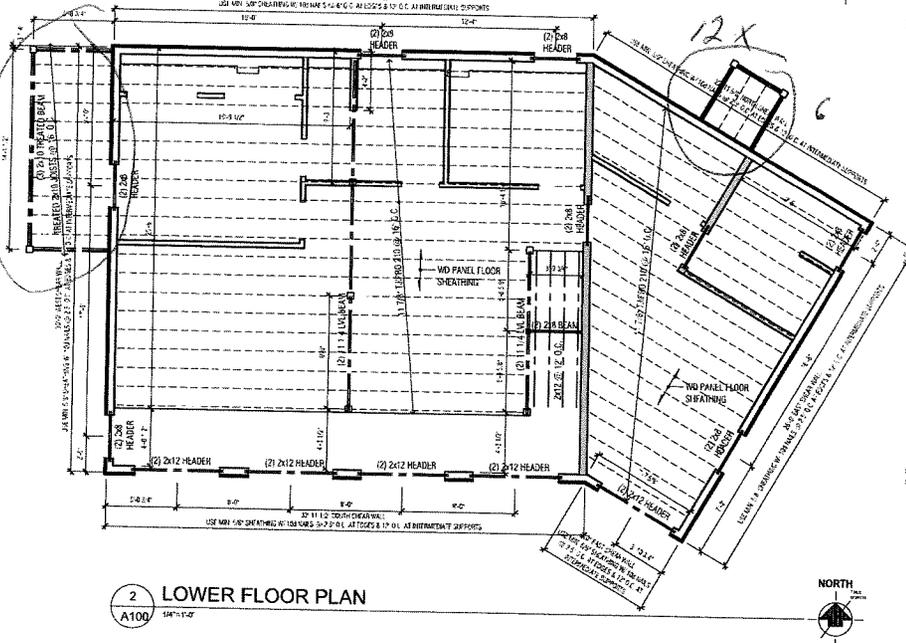
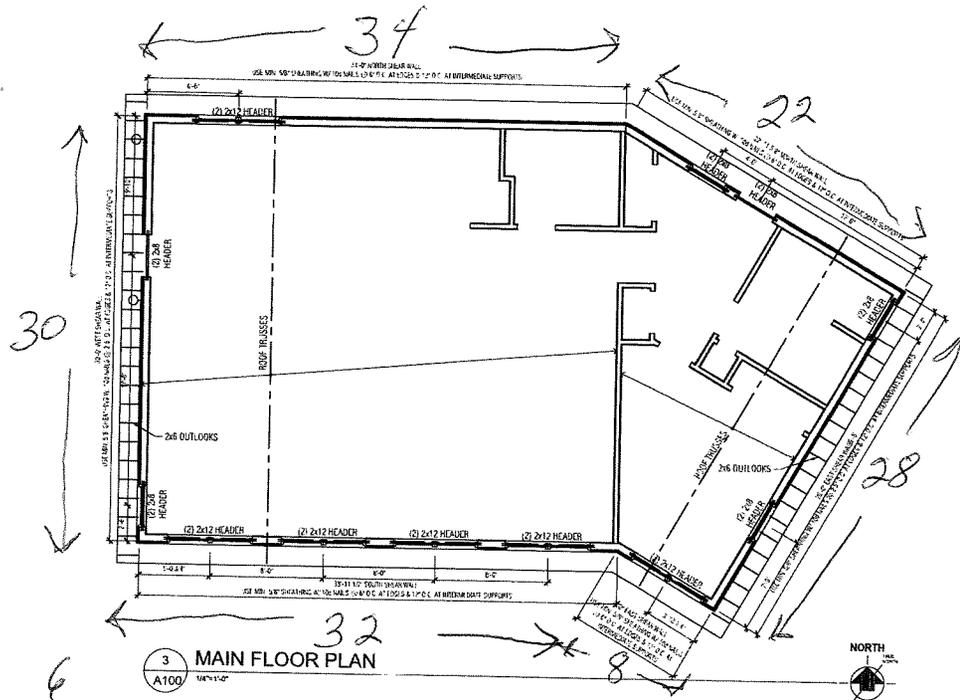
Date

My contact information is:

Address: _____

Phone: _____

Email: _____



STRUCTURAL INTERIOR WALL (2X6 FRAMING)

NON-STRUCTURAL INTERIOR WALL

PROPOSED FOR:
LATTERELL RESIDENCE
4390 KAVANAUGH ROAD, CABLE, WI 54821

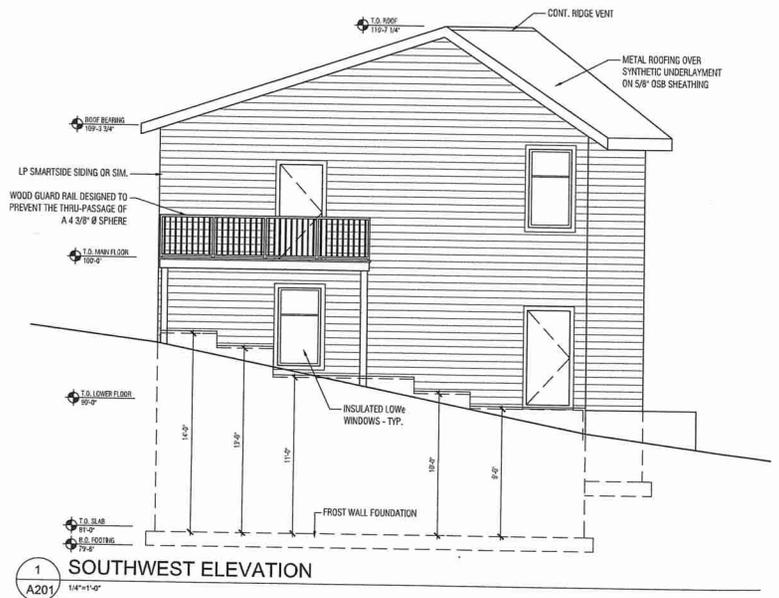
FOUNDATION & FRAMING PLAN

DESIGN & ENGINEERING
CS
2025 E. Green Valley Road, Suite 100, Saps, WI 54981
www.csdesignengineer.com

DESIGNED	L.R.
DRAWN	L.R.
SCALE	AS NOTED
DATE	November 25, 2020
PROJECT NO.	20-3478
REVISIONS	1125-30 CONSTR. DOCUMENTS

APPROVED	
SHEET NO.	S100

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PROPOSED FOR:
LATTERELL RESIDENCE
4890 KANAUGH ROAD, CABLE, WI 54821

ELEVATIONS

DESIGN & ENGINEERING
with framework design inc

CS

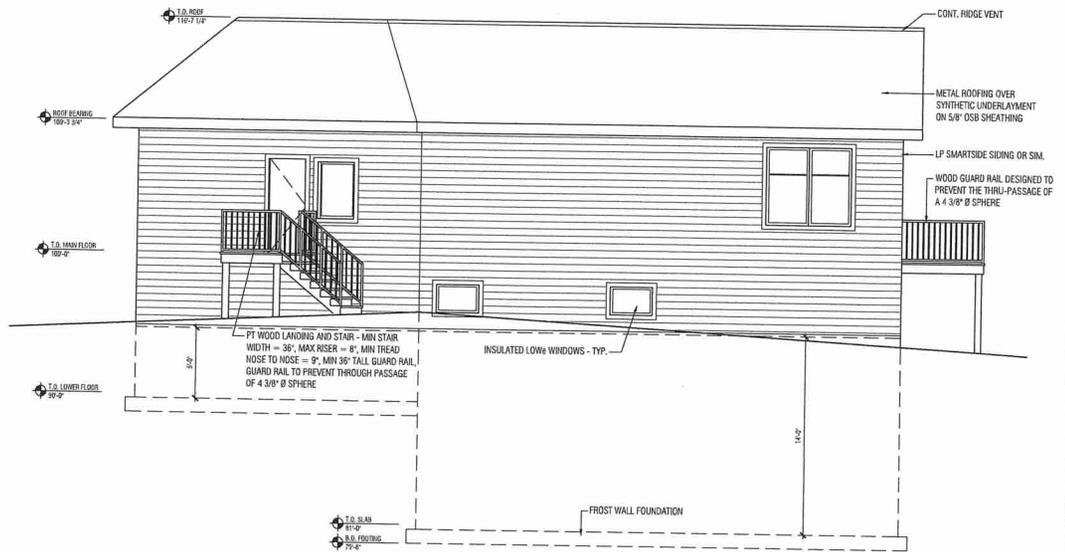
2023 6th Street West, Ashland, WI 54806
www.cseandengineering.com
Telephone (715) 842-0330

DESIGNED:	L.R.
DRAWN:	L.R.
SCALE:	AS NOTED
DATE:	November 25, 2020
PROJECT NO.:	20-3478

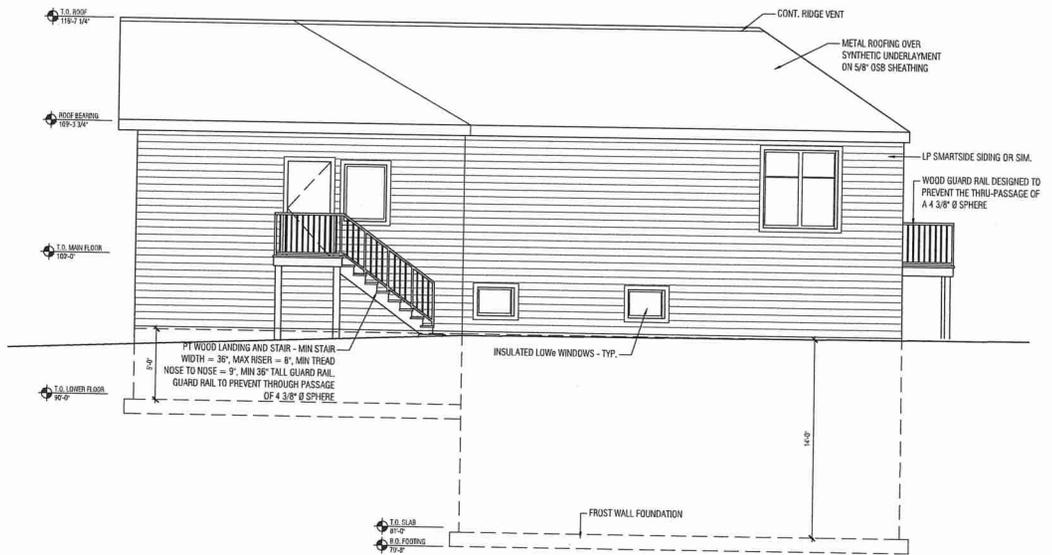
REVISIONS:	11.25.20 CONSTR. DOCUMENTS

APPROVED:

SHEET NO.
A201



2 NORTHWEST ELEVATION
1/4"=1'-0"



1 NORTH ELEVATION
1/4"=1'-0"

PROPOSED FOR:
LATTELL RESIDENCE
43800 KAWAUAUGH ROAD, CABLE, WI 54821

ELEVATIONS

DESIGN & ENGINEERING
with framework design inc
2033 6th Street West, Ashland, WI 54806
Telephone: (715) 682-0330
www.crosbyengineering.com

DESIGNED:	L.R.
DRAWN:	L.R.
SCALE:	AS NOTED
DATE:	November 25, 2020
PROJECT NO.:	20-3478

REVISIONS:	
11.25.20	CONSTR. DOCUMENTS

APPROVED:	

SHEET NO.
A200

BAYFIELD COUNTY SANITARY PERMIT APPLICATION

Zoning District <u> L-1 </u>
Lakes Class <u> </u>

I. APPLICATION INFORMATION <small>(Please Print All Information)</small>			Soil Test No:	County Permit No. <u>(204) 16-1395</u>
Property Owner's Name: <u>STEVEN & LAWRENCE LATTERELL</u>			County: Bayfield	
Address of Property: <u>43990 KAUHAUHA RD</u>			Property Location: <u>1/4 1/4 S 18 T 43 N, R 7 E (or) W</u>	
Property Owner's Mailing Address: <u>P.O. BOX 241</u>			Township:	Gov. Lot #:
City, State <u>CABLE WI.</u>	Zip Code <u>54821</u>	Phone Number <u>715-319-1340</u>	Lot # <u>1</u>	Block #: <u>3</u>
			CSM #:	CSM Doc #
			Subdivision Name <u>ASSISSIONS PLAT # 2</u>	

II. TYPE OF BUILDING: (Check One)		Tax ID#: <u>10025</u>
<input type="checkbox"/> State Owned		
<input type="checkbox"/> Public (Explain the use/purpose _____)		
<input checked="" type="checkbox"/> 1 or 2 Family Dwelling - No. of Bedrooms _____		

III. TYPE OF PERMIT: (Check only one box on line A. Check box on line B, if applicable)	
A) <input type="checkbox"/> New	<input type="checkbox"/> Replacement
<input type="checkbox"/> Reconnection	<input type="checkbox"/> Repair
<input checked="" type="checkbox"/> County Private Interceptor <u>TANK RELOCATION</u>	<input type="checkbox"/> Revision
** <input type="checkbox"/> Transfer of Owner (List Previous Owner below)	
B) <input checked="" type="checkbox"/> A Sanitary Permit was previously issued. Previous Permit Number <u>(204) 16-1395</u> Date Issued: <u>10/14/2016</u>	

IV. TYPE OF NON-PLUMBING SYSTEM: (Check One) * Replacements need previous permit number and date filled out above	
C) <input type="checkbox"/> Pit Privy	<input type="checkbox"/> Vault Privy (Vault size: _____ gallons or _____ cubic yards)
<input type="checkbox"/> Portable Privy	<input type="checkbox"/> Camping Transfer Unit Container
<input type="checkbox"/> Composting Toilets	<input type="checkbox"/> Incinerating Toilet

V. ABSORPTION SYSTEM INFORMATION:						
1. Gallons Per Day	2. Absorp. Area Required (Sq. Ft.)	3. Absorp. Area Proposed (Sq. Ft.)	4. Loading Rate (Gals. / Day / Sq. Ft.)	5. Perc. Rate (Min. Inch)	6. System Elev. (Feet)	7. Final Grade Elev. (Feet)

VI. TANK INFORMATION:	Capacity In Gallons		Total Gallons	# of Tanks	Manufacturer's Name	Prefab. Concrete	Site Constructed	Steel	Fiber-glass	Plastic	Exper. App.
	New Tanks	Existing Tanks									
Septic Tank or Holding Tank											
Lift Pump Tank / Siphon Chamber											

VII. RESPONSIBILITY STATEMENT:		
I the undersigned, assume responsibility for installation of the onsite sewage system shown on the attached plans.		
Owner's Name(s): (Print) <u>STEVEN & LAWRENCE LATTERELL</u>	Owner's Signature(s): (No Stamps)	
Plumber's Name: (Print) <u>Jeffrey T. Hohlfeld</u>	Plumber's Signature: (No Stamps)	MP/MPSRW No: <u>223307</u>
Plumber's Address: (Street, City State, Zip Code) <u>17610 Frels Rd. Cable, WI, 54821</u>	Home Phone: <u>715-798-3119</u>	Business Phone: <u>Same</u>

VIII. COUNTY / DEPARTMENT USE ONLY			
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Sanitary Permit/Transfer Fee:	Date Issued:
	<input type="checkbox"/> Owner Given Initial		Issuing Agent's Signature / Date:
	<input type="checkbox"/> Adverse Determination		

IX. CONDITIONS OF APPROVAL / REASONS FOR DISAPPROVAL:

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **21-79S**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0192** Issued To: **Steven & Lawrence Latterell / Karl Kastrosky, Agent**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **18** Township **43** N. Range **7** W. Town of **Cable**

Gov't Lot Lot **1** Block **3** Subdivision **Assessors Plat #2** CSM#

For: **Residential Use: [2- Story; Residence (30' x 34') = 1,020 sq. ft.; Deck #1 (6' x 16') = 96 sq. ft.; Deck #2 (6' x 12') = 72 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as proposed. Get required UDC inspections.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 24, 2021

Date